

QUARTERLY STATEMENT

AS OF MARCH 31, 2019
OF THE CONDITION AND AFFAIRS OF THE

Michigan Complete Health, Inc.

NAIC Group Code _	01295 (Current Period)		NAIC Company	Code1	0769	Employer's ID Nur	nber	30-0312489
Organized under the	,	Michigan		, State of Do	micile or	Port of Entry	Mich	nigan
Country of Domicile				United Stat	es			
Licensed as business	,	ident & Health [] ervice Corporation []	Property/Cas Vision Service		Н [] Н	ospital, Medical & Deni ealth Maintenance Org HMO Federally Qualifi	janization [X]
Incorporated/Organize	-	12/09/2004	Commer	nced Business		•	15/2005	1110[71]
Statutory Home Office	·	800 Tower Rd., S	Suite 200	,		Troy, MI, US		
		(Street and Nun	•			(City or Town, State, Co.	, ,	,
Main Administrative Of	тісе	7700 Forsyth Boulevard (Street and Number)				O, US 63105 ountry and Zip Code)		4-725-4477 (Telephone Number)
Mail Address	77	00 Forsyth Boulevard		. (Only of You	iii, Olalo, Ol	Saint Louis, MO, US	•	, (receptione realiser)
	(Stre	eet and Number or P.O. Box)		- '	(City or Town, State, Country a		
Primary Location of Bo	ooks and Records		th Boulevard			s, MO, US 63105		4-725-4477
Internativials Cite Add		(Street an	d Number)	, ,		ite, Country and Zip Code)	(Area Code	e) (Telephone Number)
Internet Web Site Add		Tana Maria Far	•	ww.michiganco	mpieten			
Statutory Statement C	ontact	Tanya Marie Fer	guson			314-725-44 (Area Code) (Telephone Nu		ion)
	taferguson@cei					314-725-4658		
	(E-Mail Addı	ress)				(FAX Number)		
			OFFIC	ERS				
Name		Title			Name			tle
Amy Willian		President		Keith Ha	rvey Willi	amson,	Secretary	
Christopher I	lsaak,	Treasurer						
Tricia Lynn Din	kelman	Vice President o	OTHER OF	FICERS				
	,	***************************************						
Amy Willian	ms	DIRE Christopher Is	CTORS OI		E ES aryl Pack	<u> </u>		
above, all of the herein de this statement, together v and of the condition and been completed in accordiffer; or, (2) that state r knowledge and belief, res	St. Charles ting entity being du escribed assets were with related exhibits affairs of the said r dance with the NA rules or regulations spectively. Furthern exact copy (exceptions)	ly sworn, each depose and e the absolute property of a schedules and explanation eporting entity as of the reflic Annual Statement Instruction require differences in report, the scope of this attent for formatting difference	the said reporting of the said reporting period statuctions and Accounting not related estation by the des	entity, free and cloned, annexed or led above, and of unting Practices at to accounting particles at the accountin	ear from a referred to fits income and Proce practices a lso include	any liens or claims thereon b, is a full and true statem e and deductions therefro dures manual except to the and procedures, according es the related correspondi	n, except as hence of all the om for the pe he extent that to the besting electronic	nerein stated, and that e assets and liabilities priod ended, and have at: (1) state law may of their information, c filing with the NAIC,
Marcie Johnson CEO			Keith Harvey Secre				istopher Isa Treasurer	aak
					a le	this an original filing?		Yes [X] No []
Subscribed and sw		this ,			b. If 1.	0 0	number	
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						F - 0 2 - 2		

ASSETS

1. Bords				Current Statement Date)	4
1. Bords			1	2	3	
1. Sords			Acceta	Nanadmitted Assets		Prior Year Net
2. Discuss 2.1 Preferred sclocks 2.2 Common stocks 3.1 Fire Lones 3.1 Fire Lones 3.2 Common stocks 3.1 Fire Lones 3.3 Common stocks 4. Real existing 4. Fire Lones 4. Real existing 5.1 Fire Lones 5. Common stocks 6. Common stocks 7. Common stocks 8. Common stocks 9. Common stock		Danda			` ′	
2.1 Printernot access	i		1,099,321			1,099,449
2 Common spocks					0	0
3. Office from the selection of the sele			i			i i
3.1 First terms	3.					
4. Properties outspield by the company (less 8					0	0
4.2 Properties occupied by the company (tess 3		3.2 Other than first liens			0	0
\$	4.	Real estate:				
4.2 Proporties held for the production of montem (leas \$		4.1 Properties occupied by the company (less				
		·			0	0
4.3 Properties held for sale (less \$ 5						
S Security Securi				<u></u>	0	0
5. Cash (\$2,34,418), cash equivalents (\$		•				
and shot-term investments (\$ \$ D)					0	0
and short-term investments (\$0)						
6. Contract Joans (Including S premium notes)			2 224 419		2 224 419	(606, 820)
7. Derivatives 0	ı					l
8. Other invested assets						i
9. Recovables for securities □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □						
10. Securities lending reinvested colleteral assets 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			l .	ı		
11. Aggregate write-ins for invested assets (Lines 1 to 1)	10.	Securities lending reinvested collateral assets				0
12 Subtotals, cash and invested assets (Lines 1 to 11)	11.	Aggregate write-ins for invested assets	0	0	0	
Investment income due and accrued	12.	Subtotals, cash and invested assets (Lines 1 to 11)	3,433,939	0	3,433,939	402,620
14. Investment income due and accrued 10,928 3,749 3,749 15. Premiums and considerations: 15. Uncollected premiums and agents' balances in the course of collection 3,519,749 3,519,749 2,723,541 15. Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$	13.	Title plants less \$				
15. Premiums and considerations: 15. Uncollected premiums and agents' balances in the course of collection 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$		**				
15.1 Uncollected premiums and agents' balances in the course of collection	l		10,928	<u> </u>	10,928	3,749
Collection	15.					
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$			2 510 740		2 510 740	2 722 541
Description						2,723,341
but unbilled premiums)						
15.3 Accrued retrospective premiums (\$, , , , , , , , , , , , , , , , , , ,			0	0
contracts subject to redetermination (\$ 1,934,774 1,934,774 1,934,774 1,025,982 16. Reinsurance: 16.1 Amounts recoverable from reinsurers 16.2 Funds held by or deposited with reinsurance contracts 16.3 Other amounts receivable under reinsurance contracts 17. Amounts receivable reliancy to uninsured plans 18.1 Current federal and foreign income tax recoverable and interest thereon 18.2 Ret deferred tax asset. 19. Guaranty funds receivable or on deposit 20. Electronic data processing equipment and software. 21. Furniture and equipment, including health care delivery assets (\$) . 22. Net adjustment in assets and liabilities due to foreign exchange rates 23. Receivables from parent, subsidiaries and affiliates 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 26 and 27) 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 26 and 27) 28. Total (Lines 26 and 27) 29. Total State Income Tax Receivable 20. Guaranty of remaining write-ins for Line 11 from overflow page 20. O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
16. Reinsurance: 16.1 Amounts recoverable from reinsurers 0			1,934,774		1,934,774	1,025,982
16.2 Funds held by or deposited with reinsured companies	16.					
16.3 Other amounts receivable under reinsurance contracts		16.1 Amounts recoverable from reinsurers			0	0
17. Amounts receivable relating to uninsured plans 0 .102,343 18.1 Current federal and foreign income tax recoverable and interest thereon .146,982 .98,009 18.2 Net deferred tax asset. 0 0 .0 19. Guaranty funds receivable or on deposit 0 0 .0 20. Electronic data processing equipment and software. 0 .0 .0 21. Furniture and equipment, including health care delivery assets (\$ </td <td></td> <td>16.2 Funds held by or deposited with reinsured companies</td> <td></td> <td></td> <td>0</td> <td>0</td>		16.2 Funds held by or deposited with reinsured companies			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon 146,982 98,009 18.2 Net deferred tax asset. 0 0 19. Guaranty funds receivable or on deposit. 0 0 20. Electronic data processing equipment and software. 0 0 21. Furniture and equipment, including health care delivery assets (s) 0 0 (s) 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 0 20. Total assets excluding Separate Accounts, segregated assets 19,602 0 19,602 0 <t< td=""><td></td><td>16.3 Other amounts receivable under reinsurance contracts</td><td></td><td></td><td></td><td></td></t<>		16.3 Other amounts receivable under reinsurance contracts				
18.2 Net deferred tax asset. 0 0 0 19. Guaranty funds receivable or on deposit 0 0 0 20. Electronic data processing equipment and software. 0 0 0 21. Furniture and equipment, including health care delivery assets (s						l i
19. Guaranty funds receivable or on deposit	l			1	i '	i ' . i
20. Electronic data processing equipment and software. 0	i		i	i	i	
21. Furniture and equipment, including health care delivery assets (\$	i	·	i			U
(\$	i				U	U
22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 23. Receivables from parent, subsidiaries and affiliates 6, 235, 347 6,235, 347 3,865,141 24. Health care (\$.537,436) and other amounts receivable. 1,100,408 .562,972 .537,436 2,742,971 25. Aggregate write-ins for other-than-invested assets 19,602 0 19,602 0 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25). 16,401,729 562,972 15,838,757 10,964,356 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts 0 0 0 28. Total (Lines 26 and 27) 16,401,729 562,972 15,838,757 10,964,356 DETAILS OF WRITE-INS 1101. 0 0 0 0 1102. 0 0 0 0 1103. 0 0 0 0 1198. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 2501. State Income Tax Receivable. 19,602 19,602 0 0 2503. 0 0 0					n	n
23. Receivables from parent, subsidiaries and affiliates 6,235,347 6,235,347 3,865,141 24. Health care (\$						
24. Health care (\$						
25. Aggregate write-ins for other-than-invested assets 19,602 0 19,602 0 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25). 16,401,729 562,972 15,838,757 10,964,356 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts. 0 0 0 28. Total (Lines 26 and 27) 16,401,729 562,972 15,838,757 10,964,356 DETAILS OF WRITE-INS 1101. 0 0 0 1102. 0 0 0 1103. 0 0 0 0 1109. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 2501. State Income Tax Receivable 19,602 19,602 0 2502. 0 0 0 0 2503. 0 0 0 0 2508. Summary of remaining write-ins for Line 25 from overflow page 0 0 0 0					i	i i
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25). 16,401,729 562,972 15,838,757 10,964,356 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts. 0			l .	1	19,602	0
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts. .0 <	26.	Total assets excluding Separate Accounts, Segregated Accounts and				
Cell Accounts. 0 0 28. Total (Lines 26 and 27) 16,401,729 562,972 15,838,757 10,964,356 DETAILS OF WRITE-INS 1101. 0 0 0 0 0 1102. 0 0 0 0 0 0 1103. 0		Protected Cell Accounts (Lines 12 to 25)	16,401,729	562,972	15,838,757	10,964,356
28. Total (Lines 26 and 27) 16,401,729 562,972 15,838,757 10,964,356 DETAILS OF WRITE-INS 1101. 0 0 0 1102. 0 0 0 1103. 0 0 0 1198. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 2501. State Income Tax Receivable 19,602 19,602 0 2502. 0 0 0 2503. 0 0 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0 0 0	27.					
DETAILS OF WRITE-INS 1101.					0	
1101. 0 0 0 1102. 0 0 0 1103. 0 0 0 1198. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 2501. State Income Tax Receivable 19,602 19,602 0 2502. 0 0 0 2503. 0 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0	28.	,	16,401,729	562,972	15,838,757	10,964,356
1102. 0 0 0 1103. 0 0 0 1198. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 2501. State Income Tax Receivable. 19,602 19,602 0 2502. 0 0 0 2503. 0 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0	440:					
1103. 0 0 0 1198. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 0 2501. State Income Tax Receivable 19,602 19,602 0 0 2502. 0 0 0 0 0 2503. 0 0 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0 0	i		i	i	i	0
1198. Summary of remaining write-ins for Line 11 from overflow page 0 0 0 0 0 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 0 2501. State Income Tax Receivable 19,602 19,602 0 0 2502. 0 0 0 0 2503. 0 0 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0 0	i		i		i	
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 0 0 0 0 2501. State Income Tax Receivable	l					n
2501. State Income Tax Receivable	l				i	n .
2502. 0 0 0 2503. 0 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0			-	-		-
2503. 0 0 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0	i		İ			0
2598. Summary of remaining write-ins for Line 25 from overflow page	i					0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) 19,602 0 19,602 0	2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
	2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	19,602	0	19,602	0

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, SAI		Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)	263.059		263,059	707,605
2.	Accrued medical incentive pool and bonus amounts				0
3.	Unpaid claims adjustment expenses				101,456
i		127 ,000		127,000	101,400
4.	Aggregate health policy reserves including the liability of				
	\$ for medical loss ratio rebate per the Public Health				
	Service Act				0
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves			0	0
8.	Premiums received in advance				0
9.	General expenses due or accrued				
	Current federal and foreign income tax payable and interest thereon (including				
10.1				0	0
	\$ on realized gains (losses))				0
	Net deferred tax liability				0
11.	Ceded reinsurance premiums payable	659		659	295
12.	Amounts withheld or retained for the account of others			0	0
13.	Remittances and items not allocated			0	0
14.	Borrowed money (including \$ current) and				
	interest thereon \$(including				
	\$ current)			0	0
15	Amounts due to parent, subsidiaries and affiliates				0
i					
16.	Derivatives				0
17.	Payable for securities				0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized reinsurers				
	and \$certified reinsurers)			0	0
20	Reinsurance in unauthorized and certified (\$				
20.	companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				0
22.	Liability for amounts held under uninsured plans	108,067		108,067	0
23.	Aggregate write-ins for other liabilities (including \$				
	current)				
24.	Total liabilities (Lines 1 to 23)	8,421,541	0	8,421,541	4,414,450
25.	Aggregate write-ins for special surplus funds	XXX	xxx	305,508	0
26.	Common capital stock				1
27.	· · · · · · · · · · · · · · · · · · ·	XXX	XXX		0
i	Gross paid in and contributed surplus			10 024 000	
1					
29.	Surplus notes				
30.	Aggregate write-ins for other-than-special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	(12,713,292)	(7,275,094)
32.	Less treasury stock, at cost:				
	32.1shares common (value included in Line 26				
	\$	XXX	XXX		0
	32.2shares preferred (value included in Line 27				
	\$	YYY	YYY		n
22	Total capital and surplus (Lines 25 to 31 minus Line 32)				
33.					
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	15,838,757	10,964,356
	DETAILS OF WRITE-INS				
2301	State Income Tax Payable			n	2,818
					l '
2302.	Subcapitated Contract-Related Liabilities				
2303.					•
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
İ			0		
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	7,340,124		7,340,124	
2501.	2020 HIF Estimate	XXX	XXX	305,508	0
2502.					
İ					i
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	xxx	305.508	0
				,	
3001.			XXX		
3002.		XXX	xxx		0
3003.					
İ					i
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	J0
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENU		_/\\		
		Current Ye	ear To Date	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months			7,998	
l	Net premium income (including \$ non-health premium income)	i	ı	i	
3.	Change in unearned premium reserves and reserve for rate credits	xxx		0	0
4.	Fee-for-service (net of \$medical expenses)	1	1		
5.	Risk revenue	i	i	i .	
6.	Aggregate write-ins for other health care related revenues				
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX	15,274,724	17, 193, 490	63,738,982
i -	al and Medical:		40,000,445	40.700.004	40, 047, 000
i	Hospital/medical benefits Other professional services	i			
	Ottner professional services		1		
12.	Emergency room and out-of-area				
13.	Prescription drugs	1	ı	1	
14.	Aggregate write-ins for other hospital and medical.	1	1		
15.	Incentive pool, withhold adjustments and bonus amounts.	1	1		
	Subtotal (Lines 9 to 15)	i	i '	i	· ·
Less:					
i	Net reinsurance recoveries			0	0
18.	Total hospital and medical (Lines 16 minus 17)	i	i	i	
19.	Non-health claims (net)		i		
20.	Claims adjustment expenses, including \$ 4,164cost containment expenses.		99 , 384	127 , 221	791,108
21.	General administrative expenses.	i	7 ,589 ,789	2,602,143	14,159,969
22.	Increase in reserves for life and accident and health contracts (including				
	\$ increase in reserves for life only)				
	Total underwriting deductions (Lines 18 through 22)		1	I	
24. 25.	Net underwriting gain or (loss) (Lines 8 minus 23)				
i	Net realized capital gains (losses) less capital gains tax of \$				22,043
27.	Net investment gains (losses) (Lines 25 plus 26)		7 ,251	3,008	22,845
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	22,010
	\$			0	0
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	xxx	(6,343,403)	(932,922)	(5,085,031)
31.	Federal and foreign income taxes incurred	xxx	(144,798)	(67,055)	(62, 104)
32.	Net income (loss) (Lines 30 minus 31)	XXX	(6,198,605)	(865,867)	(5,022,927)
0004	DETAILS OF WRITE-INS	2004			0
0601. 0602.		XXX		0	0
0603.		XXX		0	0
i	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.		XXX		0	0
0702.		xxx		0	0
0703.		xxx		0	0
0798.	Summary of remaining write-ins for Line 7 from overflow page	xxx	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	xxx	0	0	0
1401.				0	0
1402.				0	0
1403.			<u></u>	0	0
l	Summary of remaining write-ins for Line 14 from overflow page		0	J0	0
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901.				ļ0	0
2902.				0	0
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0		
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	n
∠999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	<u> </u>	<u> </u>	<u> </u>	

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	LENSES (Continue	u)
		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
	SALTIAL & GOLD AGGGGIO			
33.	Capital and surplus prior reporting year	6,549,903	7 , 124 ,057	7 , 124 , 058
34.	Net income or (loss) from Line 32	(6,198,605)	(865,867)	(5,022,927)
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$			
	Change in net unrealized foreign exchange capital gain or (loss)			
37.	Change in net deferred income tax			
38.				
39.	Change in nonadmitted assets			
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in	6,000,000	0	6,000,000
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		0	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	867,310	(808, 206)	(574, 155)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	7,417,213	6,315,851	6,549,903
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	n	n	Λ
		0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	UU	U	U

CASH FLOW

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance.	13,569,724	15,048,871	61,222,646
	Net investment income		0	19 , 93
3.	Miscellaneous income	0	0	(
4.	Total (Lines 1 to 3)	13,569,724	15,048,871	61,242,58
	Benefit and loss related payments	11,108,937	13,957,807	55,206,99
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	
7.	Commissions, expenses paid and aggregate write-ins for deductions		2,459,446	14,288,46
	Dividends paid to policyholders		0	
9.	Federal and foreign income taxes paid (recovered) net of \$tax on capital	/		
	gains (losses)	(95,825)	39,998	14,54
10.	Total (Lines 5 through 9)	14,038,478	16,457,251	69,510,00
11.	Net cash from operations (Line 4 minus Line 10)	(468,754)	(1,408,380)	(8,267,42
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	0	0	1 , 100 , 00
	12.2 Stocks	0	0	
	12.3 Mortgage loans	0	0	
	12.4 Real estate		0	
	12.5 Other invested assets	0	0	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	
	12.7 Miscellaneous proceeds	0	0	
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0	1 , 100 , 00
13.	Cost of investments acquired (long-term only):		•	4 000 07
	13.1 Bonds		0	1,099,27
	13.2 Stocks		0	
	13.3 Mortgage loans		0	
	13.4 Real estate		0	•
	13.5 Other invested assets	0	0	
	13.6 Miscellaneous applications	0	0	4 000 07
	13.7 Total investments acquired (Lines 13.1 to 13.6)	Ů	0	1,099,27
	Net increase (or decrease) in contract loans and premium notes	0	0	7.0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	0	0	73
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes		0	0. 500. 00
	16.2 Capital and paid in surplus, less treasury stock	3,500,000	0	2,500,00
		0	0	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	
	16.5 Dividends to stockholders			
4-7	16.6 Other cash provided (applied)	U	U	
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	3,500,000	0	2,500,00
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			,
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	3,031,246	(1,408,380)	(5,766,69
19.	Cash, cash equivalents and short-term investments:	/000 005	5 000 000	5 000 00
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	2,334,417	3,661,482	(696,82

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STATEMENT AS OF MARCH 31, 2019 OF THE Michigan Complete Health, Inc.

EXHIBIT OF PREMIUMS. ENROLLMENT AND UTILIZATION

	1	Compreh (Hospital &	ensive Medical)	4	5	6	7	8	9	10
		2	3	Madhana	Maria	Destal	Fortunal Front Const.	T''. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T'II. MIN	
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	2,417	0	0	0	0	0	0	2,417	0	
2. First Quarter	2,213	0	0	0	0	0	0	2,213	0	
3. Second Quarter	0	0	0	0	0	0	0	0	0	
4. Third Quarter	0									
5. Current Year	2,213							2,213		
6. Current Year Member Months	7,082							7,082		
Total Member Ambulatory Encounters for Period:										
7. Physician	12,806							12,806		
8. Non-Physician	9,726							9,726		
9. Total	22,532	0	0	0	0	0	0	22,532	0	(
10. Hospital Patient Days Incurred	447							447		
11. Number of Inpatient Admissions	131							131		
12. Health Premiums Written (a)	15,274,724							15,274,724		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	15,274,724							15 , 274 , 724		
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	14,380,752							14,380,752		
18. Amount Incurred for Provision of Health Care Services	13,936,206							13,936,206		

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims unpaid (Reported)		-		•	·	
Claims unpaid (Reported) External Capitation						54,050
			·····		 	
					·····	
0199999 Individually listed claims unpaid		0	0	0	0	54,050
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered	209,009					209,009
0499999 Subtotals	263,059	0	0	0	0	263,059
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	263,059
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	0

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID-PRIOR		ims	Liab	SIII4.	I	
		ar to Date	End of Curr		5	6
	1	2	3	4) J	"
	On Claims Incurred Prior to January 1 of	On Claims Incurred	On Claims Unpaid Dec. 31	On Claims Incurred	Claims Incurred in Prior Years	Estimated Claim Reserve and Claim Liability Dec. 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical)					0	0
Medicare Supplement					0	0
3. Dental only					0	0
4. Vision only					0	0
Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare	648,851	14,253,908	118,885	144, 174	767 ,736	707,605
7. Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	648,851	14,253,908	118,885	144, 174	767 ,736	707,605
10. Health care receivables (a)		537 , 436			0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts		15,429			0	0
13. Totals (Lines 9-10+11+12)	648,851	13,731,901	118,885	144,174	767,736	707,605

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Michigan Complete Health, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the Michigan Department of Insurance.

The State of Michigan requires that insurance companies domiciled in the state of Michigan prepare their statutory basis financial statements in accordance with the NAIC *Accounting Practices and Procedures Manual* subject to any deviations prescribed or permitted by the State of Michigan Insurance Commissioner.

NET INCOME	SSAP#	F/S Page	F/S Line #	State of Domicile	2019	2018
(1) Michigan Complete Health, Inc. state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	Michigan	\$ (6,198,606)	\$ (5,022,927)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: e.e. Depreciation of fixed assets				Michigan	<u>s - </u>	<u>s</u> -
State Permitted Practices that are an increase/(decrease) from NAIC SAP: e.e., Depreciation of fixed assets, home office property				Michigan	<u> </u>	<u>s</u> -
(4) NAICSAP (1-2-3=4)	XXX	XXX	XXX	Michigan	\$ (6,198,606)	\$ (5,022,927)
SURPLUS						
(5) Michigan Complete Health, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	Michigan	\$ 7.417.215	\$ 6,549,906
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: e.g., Goodwill, net e.g., Fined Assets, net				Michigan	\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP: e.g., Home Office Property				Michigan	\$ -	\$ -
(8) NAICSAP (5-6-7=8)	XXX	XXX	XXX	Michigan	\$ 7,417,215	\$ 6,549,906

- B. Use of Estimates in the Preparation of the Financial Statements No Change
- C. Accounting Policy
 - 1.-5. No Change
 - 6. The Company holds no loan-backed securities.
 - 7.-13. No Change
- D. Going Concern The Company's management has not identified any conditions or events that raise substantial doubt about its ability to continue as a going concern

2. Accounting Changes and Corrections of Errors

No Change

3. Business Combinations and Goodwill

- A. Statutory Purchase Method No Change
- B. Statutory Merger No Change
- C. Assumption Reinsurance No Change
- D. Impairment Loss No Change

4. Discontinued Operations

No Change

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

None

B. Debt Restructuring

None

C. Reverse Mortgages

None

D. Loan-Backed Securities

None

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

None

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

H. Repurchase Agreements Transactions Accounted for as a Sale

None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

None

J. Real Estate

None

K. Low-Income Housing Tax Credits (LIHTC)

None

- L. Restricted Assets
 - 1. Restricted Assets (Including Pledged)

	1	2	3	4	5	6
						Percentage
						Admitted
		Total Gross			Percentage	Restricted
	Total Gross	Restricted	Increase/	Total Current	Gross	to Total
	Restricted from	From Prior	(Decrease)	Year Admitted	Restricted to	Admitted
Restricted Asset Category	Current Year	Year	(1 minus 2)	Restricted	Total Assets	Assets
a. Subject to contractual						
obligation for which liability is						
not shown						
 b. Collateral held under 						
security lending agreements						
c. Subject to repurchase						
agreements						
d. Subject to reverse						
repurchase agreements						
e. Subject to dollar repurchase						
agreements						
f. Subject to dollar reverse						
repurchase agreements						
g. Placed under option						
contracts						
h. Letter stock or securities						
restricted as to sale						
i. FHLB capital stock						
j. On deposit with states	\$ 1,099,521	\$ 1,099,449	\$ 72	\$ 1,099,521	10.2%	10.8%
k. On deposit with other						
regulatory bodies						
Pledged collateral to FHLB						
(including as sets backing						
funding agreements)						
m Pledged as collateral not						
captured in other categories						
n. Other restricted assets						
o. Total Restricted Assets	\$ 1.099.521	\$ 1.099.449	\$ 72	\$ 1.099.521	10.2%	10.8%
o. Total Restricted Assets	\$ 1,099,021	a 1,099,449	3 /Z	\$ 1,099,321	10.2%	10.8%

- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories None
- 3. Detail of Other Restricted Assets None
- 4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements None

M. Working Capital Finance Investments

			None					
		N.	Offsetting and Netting of Assets and Liabilities					
			None					
		O.	Structured Notes					
			None					
		P.	5GI Securities					
			None					
		Q.	Short Sales					
			None					
		R.	Prepayment Penalties and Acceleration Fees					
			None					
6.	Join	ıt V	entures, Partnerships and Limited Liability Companies					
	No 0	Cha	nge					
7.	Investment Income							
	No Change							
8.	Der	ivat	ive Instruments					
	No 0	Cha	nge					
9.	Inco	ome	Tax					
	No 0	Cha	nge					
10.	Info	rm	ation Concerning Parent, Subsidiaries and Affiliates					
	\$6,1	07,7	d in the Company's balance sheet as of March 31, 2019 are receivables from parent, subsidiaries and affiliates of 708, due from Centene Corporation and Centene Management Company LLC, which includes a \$6,000,000 capital tion receivable.					
11.	Deb	t						
	A.	Cap	oital Notes – None					
	B.	FH	LB (Federal Home Loan Bank) Agreements - None					
12.			nent Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other rement Benefit Plans					
	A.	Def	ined Benefit Plans – None					
	B.	Inv	estment Policies and Strategies for Plan Assets – None					
	C.	Fair	Value of Each Class of Plan Assets – None					
	D.	Bas	is Used to Determine the Overall Expected Long-term Rate-of-Return-on-Assets Assumption – None					
	E.	Def	ined Contribution Plan – None					
	F.	Mu	ltiemployer Plan – None					

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

Impact of Medicare Modernization Act on Postretirement Benefits – None

G. Consolidated/Holding Company Plans – None

H. Postemployment Benefits and Compensated Absences – None

No Change

14.	Liabilities,	Contingencies	and	Assessments
-----	--------------	---------------	-----	-------------

A. Contingent Commitments

None

B. Assessments

None

C. Gain Contingencies

None

D. Claims Related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits

None

E. Joint and Several Liabilities

None

F. All Other Contingencies

None

15. Leases

No change

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No Change

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfer of Receivables Reported as Sales None
- B. Transfer and Servicing of Financial Assets None
- C. Wash Sales None

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

None

B. ASC Plans

None

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

As of March 31, 2019, the Company recorded a net payable to CMS that is greater than 10% of the Company's amounts payable from uninsured accident and health plans or \$10,000. The total balance for the Medicare Part D low-income subsidy and reinsurance subsidy is \$108,067.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No Change

20. Fair Value Measurement

A. Assets and liabilities recorded at fair value in the statutory statement of admitted assets, liabilities and capital and surplus are categorized based upon the extent to which the fair value estimates are based upon observable or unobservable inputs.

Level inputs are as follows:

Level input	Input definition
Level I	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level II	Inputs other than quoted prices included in Level I that are observable for the asset or liability through corroboration with market data at the measurement date.
Level III	Unobservable inputs that reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

The following table summarizes fair value measurements by level at March 31, 2019 for assets and liabilities measured at fair value on a recurring basis:

								Asset		
Description for each class of asset or liability	_(L	evel l)	(Le	vel 2)	(Le	ve13)	Value	(NAV)	T	ota1
a. Assets at fair value										
a. Assets at fair value Cash and Short-Term Investments										
Cash Cash	• 1	334,418	s		s		s		6 22	34,418
Short-Term Investments	. J	,534,410	3	-	3	-	3	-	دید د	134,410
Total Cash and Short-Term Investments	* 1	,334,418	s		s		s		6 22	34,418
	3 2	,554,418	3	-	5	-	5	-	در2 د	54,418
Perpetual Preferred stock Industrial and Misc	s		s		s		s		s	
	2	-	2	-	5	-	5	-	5	-
Parent, Subsidiaries and Affiliates	_		_	-		-	_		_	
Total Perpetual Preferred Stocks	\$	-	S	-	\$	-	\$	-	S	-
Bonds										
U.S. Governments	S	-	S	-	S	-	S	-	\$	-
Industrial and Misc		-		-		-		-		-
Hybrid Securities		-		-		-		-		-
Parent, Subsidiaries and Affiliates				-						
Total Bonds	S	-	S	-	S	-	S	-	S	-
Common Stock										
Industrial and Misc	S	-	S	-	S	-	S	-	S	-
Parent, Subsidiaries and Affiliates		-		-		-		-		
Total Common Stocks	S	-	S	-	S	-	S	-	S	-
Derivative assets										
Interest rate contracts	S	-	\$	-	S	-	S	-	S	-
Foreign exchange contracts		-		-		-		-		-
Credit contracts		-		-		-		-		-
Commodity futures contracts		-		-		-		-		-
Commodity forward contracts		-		-		-		-		-
Total Derivatives	S		S	-	s	-	s		S	
Separate account assets	s		S	-	s		s		s	
Total assets at fair value	\$ 2	334,418	S	-	s	-	s		\$ 23	34,418
b. Liabilities at fair value										
Derivative liabilities	S		\$	-	S	-	S		\$	
Total liabilities at fair value	\$	-	S	-	S	-	\$	-	\$	-

The following table summarizes fair value measurements by level at December 31, 2018 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	(Level l)	(Le	vel 2)	(Le	vel 3)		Asset (NAV)	_	Total
a. Assets at fair value										
Cash and Short-Term Investments										
Cash	\$	(696,829)	S	-	S	-	S	-	\$	(696,829)
Short-Term Investments	\$			-		-		-	_	
Total Cash and Short-Term Investments	\$	(696,829)	S	-	S	-	S	-	\$	(696,829)
Perpetual Preferred stock										
Industrial and Misc	S	-	\$	-	S	-	S	-	S	-
Parent, Subsidiaries and Affiliates		-		-		-		-		-
Total Perpetual Preferred Stocks	S	-	S	-	\$	-	S	-	S	-
Bonds										
U.S. Governments	s	-	\$	-	S	-	S	-	s	-
Industrial and Misc		-		-		-		-		-
Hybrid Securities		-		-		-		-		-
Parent, Subsidiaries and Affiliates		-		-		-		-		-
Total Bonds	s		S	-	s	-	s		s	
Common Stock										
Industrial and Misc	S	-	S	-	S	-	S	-	S	-
Parent, Subsidiaries and Affiliates		-		-		-		-		-
Total Common Stocks	s		s	-	s	-	s		s	
Derivative assets										
Interest rate contracts	s	-	S	-	s	-	S	-	s	-
Foreign exchange contracts		-		-		-		-		-
Credit contracts		-		-		-		-		-
Commodity futures contracts		-		-		-		-		-
Commodity forward contracts		-		-		-		-		-
Total Derivatives	S		s	-	s	-	s		s	
Separate account assets	s		s	-	s	-	s		s	
Total assets at fair value	S	(696,829)	S	-	\$	-	\$	-	\$	(696,829)
b. Liabilities at fair value										
Derivative liabilities	S	-	S	-	S		s	-	s	-
Total liabilities at fair value	\$	-	S	-	S	-	\$	-	\$	-

B. None

C. The following table summarizes the aggregate fair value measurements by level at March 31, 2019 for all financial instruments.

Type of Financial Instrument		ggregate Pair Value		Admitted Assets		Level I	L	evel II	Let	vel III_		Asset	Pract (Car	lot icable rying lue)
Total Cash and														
Short-Term Investments	\$	2,334,418	\$	2,334,418	\$	2,334,418	\$	-	\$	-	\$	-	\$	-
Bonds		1,104,813		1,099,521		1,104,813		-		-		-		-
Common Stock		-		-		-		-		-		-		-
Perpetual Preferred Stock		-		-		-		-		-		-		-
Mortg age Loans		-	_	-	_	-		-	_	-				
Type of Financial Instrument Total Cash and Short-TermInvestments Bonds Common Stock Perpe tual Preferred Stock		3.439.231	s	3.433.939	s	3,439,231	s	_	s	_	s	_	s	_

The following table summarizes the aggregate fair value measurements by level at December 31, 2018 for all financial instruments.

Type of Financial Instrument	ggregate air Value	Admitted Assets	_	Level I	La	evel II	Lev	vel III	Asset (NAV)	Pract (Car	vot ticable mying liue)
Total Cash and											
Short-Term Investments	\$ (696,829)	\$ (696,829)	\$	(696,829)	\$	-	\$	-	\$ -	\$	-
Bonds	1,101,826	1,099,449		1,101,826		-		-	-		-
Common Stock	-	-				-		-	-		-
Perpetual Preferred Stock	-	-		-		-		-	-		-
Mortgage Loans		-						-	-		-
Total	\$ 404,997	\$ 402,621	\$	404,997	\$	-	\$	-	\$ 	\$	
Mortg age Loans	\$ 404.997	\$ 402,621	\$	404,997	\$		\$		\$ 	\$	

D. Aggregate Fair Value for All Financial Statements

None

E. Investments Measured Using the NAV Practical Expedient

None

21. Other Items

- A. Extraordinary Items No Change
- B. Troubled Debt Restructuring: Debtors No Change
- C. Other Disclosures and Unusual Items No Change
- D. Business Interruption Insurance Recoveries No Change
- E. State Transferable and Non-Transferable Tax Credits No Change
- F. Subprime Mortgage Related Risk Exposure No Change
- G. Retained Assets No Change
- H. Insurance-Linked Securities (ILS) Contracts No Change

22. Events Subsequent

<u>Type I – Recognized Subsequent Events</u>

Subsequent events have been considered through May 14, 2019 for the statutory statement issued as of March 31, 2019 on May 15, 2019.

On May 14, 2019, the Company received a surplus contribution of \$6,000,000. The Company estimated and recorded a receivable of \$6,000,000 on Line 23 of the Assets page of March 31, 2019 for this contribution.

Type II – Nonrecognized Subsequent Events

Subsequent events have been considered through May 14, 2019 for the statutory statement issued as of March 31, 2019 on May 15, 2019.

None

23. Reinsurance

- A. Ceded Reinsurance Report No change
- B. Uncollectible Reinsurance No change
- C. Commutation of Ceded Reinsurance No change
- D. Certified Reinsurance Rating Downgraded or Status Subject to Revocation No change

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- **A.** The Company estimates accrued retrospective premiums for its federal and state sponsored programs in accordance with the provisions in its contract with the Centers for Medicare and Medicaid Services and the Michigan Department of Health and Human Services.
- B. The Company records accrued retrospective premium through written premium.
- C. The amount of net premiums written by the Company at March 31, 2019 which are subject to retrospective rating features were \$15.3 million, which represents 100% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.
- D. Medical Loss Ratio Rebates Required per Public Health Service Act No Change
- E. Risk-Sharing Provisions of the Affordable Care Act (ACA) None

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves for incurred claims and claim adjustment expenses as of December 31, 2018 were \$0.78 million. As of March 31, 2019, \$0.65 million has been paid for incurred claims and claims adjustment expense attributable to insured events of prior years. Reserves remaining for prior years are now \$0.12 million, as a result of re-estimation of unpaid claims and claims adjustment expenses. Therefore, there has been a \$0.01 million favorable prior-year development since December 31, 2018 to March 31, 2019. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements

No Change

27. Structured Settlements

No Change

28. Health Care Receivables

- 1. Pharmaceutical Rebate Receivables At March 31, 2019, the Company admitted healthcare receivables of \$472,001. These are admitted in accordance with SSAP No. 84 as they are estimated amounts related solely to actual prescriptions filled during the 3 months immediately preceding the reporting date. The amounts are estimated based on historical per script rebates and the actual number of scripts during the period.
- 2. Risk Sharing Receivables No Change

29. Participating Policies

None

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves \$0

2. Date of the most recent evaluation of this liability March 31, 2019

3. Was anticipated investment income utilized in this calculation? Yes

31. Anticipated Salvage and Subrogation

No Change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1			ansactions requiring the filing of Disclosure of N					Yes []	No [X]
1.2			y state?					Yes []	No []
2.1			s statement in the charter, by-laws, articles of ir					Yes []	No [X]
2.2	If yes, date of change:									
3.1	Is the reporting entity a which is an insurer?	a member of an Insurance H	lolding Company System consisting of two or m	ore affiliated pe	rsons, one or r	more of		Yes [X]	No []
	If yes, complete Scheo	dule Y, Parts 1 and 1A.								
3.2	Have there been any s	substantial changes in the or	ganizational chart since the prior quarter end?					Yes []	No [X]
3.3	·	s yes, provide a brief descri	ption of those changes.							
3.4	Is the reporting entity p	oublicly traded or a member	of a publicly traded group?					Yes [X]	No []
3.5	If the response to 3.4 i	s yes, provide the CIK (Cen	tral Index Key) code issued by the SEC for the	entity/group				(0001	071739
4.1	Has the reporting entit	y been a party to a merger of	or consolidation during the period covered by th	is statement?				Yes []	No [X]
	If yes, complete and fil	le the merger history data file	e with the NAIC for the annual filing correspond	ing to this period	d.					
4.2		ne of entity, NAIC Company esult of the merger or consol	Code, and state of domicile (use two letter statidation.	e abbreviation) f	or any entity th	at has				
			1 Name of Entity NAI	2 C Company Cod	e State of I					
5.	fact, or similar agreem If yes, attach an explai	ent, have there been any signation.	agreement, including third-party administrator(s gnificant changes regarding the terms of the ag	reement or princ	sipals involved	?	Yes []	-		
6.1			on of the reporting entity was made or is being						12/3	1/2017
6.2	State the as of date th This date should be th	at the latest financial examir e date of the examined bala	nation report became available from either the since sheet and not the date the report was com	tate of domicile pleted or release	or the reportined.	g entity.		<i>'</i>	12/3	1/2012
6.3	or the reporting entity.	This is the release date or o	ion report became available to other states or the completion date of the examination report and resources.	ot the date of th	e examination	(balance			06/2	4/2014
6.4	By what department of									
	0 1		I Services							
6.5			e latest financial examination report been accou				Yes []	No []	NA [X]
			financial examination report been complied with				Yes [X]	No []	NA []
	suspended or revoked	by any governmental entity	thority, licenses or registrations (including corp during the reporting period?					Yes []	No [X]
7.2	If yes, give full informa									
8.1			npany regulated by the Federal Reserve Board					Yes []	No [X]
8.2	, ,	,	of the bank holding company.							
8.3			thrifts or securities firms?					Yes [1	No [X]
	If response to 8.3 is ye federal regulatory serv	es, please provide below the rices agency [i.e. the Federa	names and location (city and state of the main Il Reserve Board (FRB), the Office of the Comp curities Exchange Commission (SEC)] and ider	office) of any af troller of the Cur	filiates regulate rency (OCC),	ed by a the Federal		.00 [,	[]
		1	2	3	4	5	6			
	V ***:1:	ata Nama	Location	FDD	000	FDIC	050			

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal similar functions) of the reporting entity subject to a code of ethics, which includes					Yes [X]	No []
	 (a) Honest and ethical conduct, including the ethical handling of actual or appare (b) Full, fair, accurate, timely and understandable disclosure in the periodic repor (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or person (e) Accountability for adherence to the code. 	rts required	to be filed by the r			ips;	
9.11	If the response to 9.1 is No, please explain:						
9.2	Has the code of ethics for senior managers been amended?					Yes []	No [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).						
9.3	Have any provisions of the code of ethics been waived for any of the specified off					Yes []	No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).						
		ANCIA				V 5V2	
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affile	iliates on Pa	age 2 of this staten	nent?		Yes [X]	No []
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amoun				\$	6,00	00,000
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, plac for use by another person? (Exclude securities under securities lending agreement		ption agreement,			Yes []	No [X]
11.2	If yes, give full and complete information relating thereto:						
12.	Amount of real estate and mortgages held in other invested assets in Schedule B						0
13.	Amount of real estate and mortgages held in short-term investments:				\$		0
14.1	Does the reporting entity have any investments in parent, subsidiaries and affilia	ates?				Yes []] No [X]
14.2	If yes, please complete the following:						
	14.21 Bonds	\$	1 Prior Year-End Book/Adjusted Carrying Value) s	2 Current Quarter Book/Adjusted Carrying Value		
	14.22 Preferred Stock 14.23 Common Stock	\$	(\$			
	14.24 Short-Term Investments		(\$			
	14.25 Mortgage Loans on Real Estate 14.26 All Other						
	14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$	() \$	0		
	14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	•		•			
15.1	Has the reporting entity entered into any hedging transactions reported on Schedu	lule DB?				Yes []	No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available.	lable to the	domiciliary state?			Yes []	No []
	If no, attach a description with this statement.						
16	For the reporting entity's security lending program, state the amount of the following 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, F	-		t date:	\$		0
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported			d 2	\$		0
	16.3 Total payable for securities lending reported on the liability page				\$		0

GENERAL INTERROGATORIES

17.	entity's offices, vaults of pursuant to a custodial Considerations, F. Out	or safety deposit boxes, we I agreement with a qualifie	ere all stocks, bonds a d bank or trust compai ons, Custodial or Safel	nd other securities, on the in accordance wit keeping Agreements	wned thr Section	ents held physically in the reporting oughout the current year held 1, III – General Examination AIC Financial Condition Examiners	Yes [X] No []
17.1	For all agreements that	t comply with the requirem	ents of the NAIC Fina	ncial Condition Exar	niners Ha	ndbook, complete the following:	
		Nama a	1 Custodian(a)			2 Custodian Address	
			Custodian(s)	P0 Box 18		Custodian Address Paul, MN 55101	
17.2	For all agreements tha location and a complet		equirements of the NAI	C Financial Conditio	n Examin	ners Handbook, provide the name,	
		1 Name(s)	Lo	2 ocation(s)		3 Complete Explanation(s)	
17.3	Have there been any o	changes, including name c	hanges, in the custodia	an(s) identified in 17	1 during	the current quarter?	Yes [] No [X]
17.4	If yes, give full and cor	mplete information relating	thereto:				
		1 Old Custodian	2 New Custodian	3 Date of Ch	ange	4 Reason	
		Old Custodian	New Custodian	Date of Cr	ange	Reason	
17.5	authority to make inves		of the reporting entity	. For assets that are	managed	cluding individuals that have the d internally by employees of the "]	
	Na	1 ame of Firm or Individual			2 Affiliat	ion	
7.509		luals listed in the table for a "U") manage more than			ıffiliated v	with the reporting entity	Yes [] No [X]
7.509		naffiliated with the reportir under management aggre					Yes [] No [X]
17.6	For those firms or indiv	viduals listed in the table fo	or 17.5 with an affiliatio	on code of "A" (affilial	ed) or "U'	" (unaffiliated), provide the informatio	n for the table below.
	1 Central Registr Depository Nur		2 of Firm or dividual	3 Legal Entity Identifier (LE)	4 Registered With	5 Investment Management Agreement (IMA) Filed
18.1 18.2	Have all the filing requ	irements of the Purposes	and Procedures Manu	al of the NAIC Inves	ment Ana	alysis Office been followed?	Yes [X] No [
19.	By self-designating 5G	I securities, the reporting	entity is certifying the fo	ollowing elements fo	r each se	If-designated 5GI security:	
	a. PL security is rb. Issuer or oblige		ed interest and princip	al payments.		NAIC CRP credit rating for an FE or	
		•					Yes [] No [X]
20.	By self-designating PL	GI securities, the reporting	entity is certifying the	following elements	of each se	elf-designated PLGI security:	
	•	as purchased prior to Januentity is holding capital cor	•	IAIC Designation ren	orted for	the security.	
	The NAIC Des	signation was derived from	the credit rating assign	ned by an NAIC CF	P in its le	egal capacity as a NRSRO which is	
		rrent private letter rating hentity is not permitted to sh					
	Has the reporting entity	y self-designated PLGI se	curities?				Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:	
1.1 A&H loss percent	91.3 %
1.2 A&H cost containment percent	0.0 %
1.3 A&H expense percent excluding cost containment expenses.	49.5 %
2.1 Do you act as a custodian for health savings accounts?	Yes [] No [X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date	·
2.3 Do you act as an administrator for health savings accounts?	Yes [] No [X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date	
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [] No [X]
3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	f Yes [] No [X]

SCHEDULE S - CEDED REINSURANCE

		_
Showing	All New Reinsurance Treaties - Current Year to	o Date

			Showing All New Reinsurance Tre	eaties - Current Year to Date				
1 NAIC Company Code	2	3 Effective	4	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
Company Code	ID Number	Doto	Name of Reinsurer	Jurisdiction	Ceded	Type of Reinsurer	(1 through 6)	Reinsurer Rating
			LIFE & ANNUITY - AFFILIATES				,	
			LIFE & ANNUITY — AFFILIATES LIFE & ANNUITY — NON-AFFILIATES ACCIDENT & HEALTH — AFFILIATES BANKERS RESERVE LIFE INS CO OF WI. ACCIDENT & HEALTH — NON-AFFILIATES					
			ACCIDENT & HEALTH — AFFILIATES					
71013	39-0993433	01/01/2019	BANKERS RESERVE LIFE INS CO OF WI	WI	SSL/G/L	Authorized		
			ACCIDENT & HEALTH — NON-AFFILIATES					
			PROPERTY/CASUALTY - AFFILIATES					
			PROPERTY/CASUALTY — AFFILIATES PROPERTY/CASUALTY — NON-AFFILIATES					
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

		Current Year to Date - Allocated by States and Territories 1 Direct Business Only									
		1	2	3	4	5	6	7	8	9	
			Accident &			Federal Employees Health Benefits	Life & Annuity Premiums &	Property/	Total		
	States, Etc.	Active	Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Program	Other	Casualty	Columns 2 Through 7	Deposit-Type	
1.	Alabama	Status (a)	riemiums	TIUE AVIII	TILLE VIX	Premiums	Considerations	Premiums	2 Inrough 7	Contracts	
2.	Alaska Al	N							0		
	Arizona Az						<u> </u>		0		
i	Arkansas AF								J		
1	California								0		
	Connecticut								0		
i	DelawareDE								0		
	Dist. Columbia								0		
	Florida FL Georgia Go								J		
	Hawaii HI								0		
1	IdahoID	N							0		
1	Illinois IL	N							0		
1	Indiana IN Iowa IA	N N	 			†	 	l	ļ0		
1	Kansas KS		<u> </u>						n		
1	Kentucky KY	/ N							0		
19.	Louisiana LA	N							0		
1	Maine MI		 	l		 	 	l	ļ0	ļ	
	Maryland Mi Massachusetts Mi		†	l		†	<u> </u>		j	ļ	
	Michigan Mi			15,274,724					15,274,724		
24.	Minnesota Mi	NN	ļ	ļ		ļ	ļ		ļ0		
	Mississippi Ms		ļ	<u> </u>		ļ	ļ	l	ļ0		
1	Missouri Me Montana M								0		
	Nebraska NE								0		
	NevadaN	-							0		
30.	New Hampshire Nh	1N					ļ		0		
	New Jersey		 	L	L	 	ļ	L	ļ0	ļ	
1	New York N	1	<u> </u>			†	†		h	ļ	
1	North Carolina No								0		
i	North DakotaNI)N	ļ	ļ		ļ	ļ	ļ	ļ0		
i	OhioOl						ļ		ļ0		
1	Oklahoma Ol Oregon Ol			l	L	 	 	l	0	ļ	
1	Pennsylvania PA		İ			İ			0		
1	Rhode Island RI								ļ0		
	South Carolina SC			ļ		ļ		ļ	0	ļ	
	South Dakota SI		 	l		 	ļ	l	ļ0	ļ	
1	Tennessee TN Texas T>								h		
1	UtahU								0		
46.	Vermont V	- N				ļ		ļ	ļ0		
	VirginiaVA								J0		
	Washington W. West Virginia W. W.						<u> </u>	l	10	ļ	
1	Wisconsin W								0		
1	WyomingW	YN	I	l					0		
1	American Samoa AS								ļ0		
	Guam Gli Puerto Rico PF						 		ļ0		
1	U.S. Virgin Islands VI								n		
1	Northern Mariana Islands MI								0		
57.	Canada CA	ANN							0		
1	Aggregate other alienO		0	0 45 274 724	0		0	0	15 274 724	<u> </u>	
1	SubtotalReporting entity contributions for	XXX	0	15,274,724	0	0	0	l0	15,274,724	ļ0	
00.	Employee Benefit Plans	XXX					ļ		0		
61.	Total (Direct Business)	XXX	0	15,274,724	0	0	0	0	15,274,724	0	
59001	DETAILS OF WRITE-INS	vvv									
58001. 58002.		XXX									
1											
58998.	Summary of remaining write-ins to Line 58 from overflow page	orXXX	0	0	0	0	0	0	0	0	
	Totals (Lines 58001 through 580 plus 58998) (Line 58 above) rive Status Counts	XXX XXX	0	0	0	0	0	0	0	0	

⁽a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG . E – Eligible – Reporting entities eligible or approved to write surplus lines in the state ...

N – None of the above – Not allowed to write business in the state

Co	ntene Corporation	42-1406317	DE	
Ce	Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
	Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	7 10 13
	Peach State Health Plan, Inc	20-3174593	GA	12315
	·	46-2860967	MO	12313
	Health Plan Real Estate Holding, Inc (21%)		_	15710
	lowa Total Care, Inc	46-4829006	IA	15713
	Buckeye Community Health Plan, Inc	32-0045282	OH	11834
	Health Plan Real Estate Holding, Inc (13%)	46-2860967	MO	40050
	Absolute Total Care, Inc	20-5693998	SC	12959
	Health Plan Real Estate Holding, Inc (1%)	46-2860967	MO	
	Coordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
	Health Plan Real Estate Holding, Inc (15%)	46-2860967	MO	
	Healthy Washington Holdings, Inc	46-5523218	DE	
	Coordinated Care of Washington, Inc	46-2578279	WA	15352
	Managed Health Services Insurance Corp	39-1678579	WI	96822
	Health Plan Real Estate Holding, Inc (2%)	46-2860967	MO	
	Hallmark Life Insurance Co	86-0819817	AZ	60078
	Superior HealthPlan, Inc	74-2770542	TX	95647
	Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
	Healthy Louisiana Holdings LLC	27-0916294	DE	
	Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
	Magnolia Health Plan Inc	20-8570212	MS	13923
	IlliniCare Health Plan, Inc	27-2186150	IL	14053
	Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
	Sunshine Health Holding LLC	26-0557093	FL	
	Sunshine State Health Plan, Inc	20-8937577	FL	13148
	Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
	Healthy Missouri Holding, Inc (95%)	45-5070230	MO	
	Home State Health Plan, Inc	45-2798041	MO	14218
	Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
	Sunflower State Health Plan, Inc	45-3276702	KS	14345
	Granite State Health Plan, Inc	45-4792498	NH	14226
	California Health and Wellness Plan	46-0907261	CA	
	Michigan Complete Health, Inc.	30-0312489	MI	10769
	Western Sky Community Care, Inc.	45-5583511	NM	16351
	SilverSummit Healthplan, Inc.	20-4761189	NV	16143
	University Health Plans, Inc.	22-3292245	NJ	
	Agate Resources, Inc.	20-0483299	OR	
	Trillium Community Health Plan, Inc.	42-1694349	OR	12559
	Nebraska Total Care, Inc.	47-5123293	NE	15902
	Pennsylvania Health & Wellness, Inc.	47-5340613	PA	16041

Superior HealthPlan Community Solutions, Inc.	47-5664832	TX	15912
Sunshine Health Community Solutions, Inc.	47-5667095	FL	15927
Buckeye Health Plan Community Solutions, Inc.	47-5664342	OH	16112
Arkansas Health & Wellness Health Plan, Inc.	81-1282251	AR	16130
Arkansas Total Care Holding Company, LLC (49%)	38-4042368	DE	
Arkansas Total Care, Inc.	82-2649097	AR	16256
Healthy Oklahoma Holdings, Inc.	81-2788043	DE	
Oklahoma Complete Health Inc.	81-3121527	OK	
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona Inc.	20-4980818	AZ	16310
Celtic Group, Inc	36-2979209	DE	
Celtic Insurance Company	06-0641618	IL	80799
Ambetter of Magnolia Inc	35-2525384	MS	15762
Ambetter of Peach State Inc.	36-4802632	GA	15729
Novasys Health, Inc	27-2221367	DE	
CeltiCare Health Plan Holdings LLC	26-4278205	DE	
CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
Centene Management Company LLC	39-1864073	WI	
CMC Real Estate Co. LLC	20-0057283	DE	
Centene Center LLC	26-4094682	DE	
Centene Center I, LLC	82-1816153	DE	
Centene Center II, LLC	47-5156015	DE	
Centene Center III, LLC	82-3210933	DE	
CMC Hanley, LLC	46-4234827	MO	
GPT Acquisition LLC	45-5431787	DE	
LSM Holdco, Inc.	46-2794037	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
Arkansas Total Care Holding Company, LLC (25%)	38-4042368	DE	
CCTX Holdings, LLC	20-2074217	DE	
Centene Company of Texas, LP (1%)	74-2810404	TX	
Centene Holdings, LLC	20-2074277	DE	
Centene Company of Texas, LP (99%)	74-2810404	TX	
MHS Travel & Charter, Inc	43-1795436	WI	
Health Care Enterprises, LLC	46-4855483	DE	
Envolve Holdings, Inc.	22-3889471	DE	
Cenpatico Behavioral Health, LLC	68-0461584	CA	
CBHSP Arizona, Inc	86-0782736	ΑZ	
Cenpatico of California, Inc	47-2595704	CA	
Integrated Mental Health Management, L.L.C.	74-2892993	TX	
Integrated Mental Health Services	74-2785494	TX	
Cenpatico Behavioral Health of Arizona, LLC	20-1624120	ΑZ	
•			

Cenpatico of Arizona Inc.	80-0879942	AZ	
Envolve, Inc.	37-1788565	DE	
AHA Administrative Services, LLC	47-4545413	AL	
Envolve - New York, Inc.	47-3454898	NY	
Community Care of Central Colorado, LLC	82-2288767	DE	
Envolve PeopleCare, Inc.	06-1476380	DE	
LiveHealthier, Inc.	47-2516714	DE	
Envolve Benefits Options, Inc.	61-1846191	DE	
Envolve Vision Benefits, Inc.	20-4730341	DE	
Envolve Captive Insurance Company, Inc.	36-4520004	SC	
Envolve Vision of Texas, Inc.	75-2592153	TX	95302
Envolve Vision, Inc	20-4773088	DE	
Envolve Vision IPA of New York, Inc.	83-2460878	NY	
Envolve Vision of Florida, Inc	65-0094759	FL	
Envolve Total Vision, Inc.	20-4861241	DE	
Envolve Optical, Inc.	82-2908582	DE	
Envolve Dental, Inc.	46-2783884	DE	
Envolve Dental of Florida, Inc.	81-2969330	FL	
Envolve Dental of Texas, Inc.	81-2796896	TX	16106
Envolve Dental IPA of New York, Inc.	83-1464482	NY	
Envolve Pharmacy Solutions, Inc.	77-0578529	DE	
LBB Industries, Inc	76-0511700	TX	
RX Direct, Inc	75-2612875	TX	
Envolve Pharmacy IPA, LLC	46-2307356	NY	
Casenet LLC	90-0636938	DE	
Casenet S.R.O.	Foreign	CZE	
MHM Services, Inc.	82-5316510	DE	
Centurion LLC	90-0766502	DE	
Centurion of Arizona, LLC	81-4228054	AZ	
Centurion of Vermont, LLC	47-1686283	VT	
Centurion of Mississippi, LLC	47-2967381	MS	
Centurion of Tennessee, LLC	30-0752651	TN	
Centurion of Minnesota, LLC	46-2717814	MN	
Centurion Correctional Healthcare of New Mexico, LLC	81-1161492	NM	
Centurion of Florida, LLC	81-0687470	FL	
Centurion of Maryland, LLC	81-4938030	MD	
Centurion of Philadelphia, LLC	81-5429405	PA	
Centurion Detention Health Services, LLC	82-4735175	DE	
Centurion of New Hampshire, LLC	82-4823469	DE	
MHM Correctional Services, LLC	54-1856340	DE	
MHM Services of California, LLC	51-0620904	CA	

MHM Solutions, LLC	60-0002002	DE
Forensic Health Services, LLC.	26-1877007	DE
MHM Health Professionals, LLC	46-1734817	DE
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE
Specialty Therapeutic Care, LP (99.99%)	73-1698808	TX
Specialty Therapeutic Care, GP, LLC	73-1698807	TX
Specialty Therapeutic Care, LP (0.01%)	73-1698808	TX
AcariaHealth Solutions, Inc.	80-0856383	DE
AcariaHealth, Inc.	45-2780334	DE
AcariaHealth Pharmacy #14, Inc	27-1599047	CA
AcariaHealth Pharmacy #11, Inc	20-8192615	TX
AcariaHealth Pharmacy #12, Inc	27-2765424	NY
AcariaHealth Pharmacy #13, Inc	26-0226900	CA
AcariaHealth Pharmacy, Inc	13-4262384	CA
HomeScripts.com, LLC	27-3707698	MI
New York Rx, Inc.	20-8235695	NY
Foundation Care, LLC (80%)	20-0873587	МО
U.S. Medical Management Holdings, Inc	27-0275614	DE
U.S. Medical Management, LLC (20%)	38-3153946	DE
U.S. Medical Management, LLC (80%)	38-3153946	DE
RMED, LLC	31-1733889	FL
IAH of Florida, LLC	47-2138680	FL
Heritage Home Hospice, LLC	51-0581762	MI
Grace Hospice of Austin, LLC	20-2827613	MI
ComfortBrook Hospice, LLC	20-1530070	OH
Comfort Hospice of Texas, LLC	20-4996551	MI
Grace Hospice of San Antonio, LLC	20-2827526	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Grace Hospice of Indiana, LLC	45-0634905	MI
Grace Hospice of Virginia, LLC	45-5080637	MI
Comfort Hospice of Missouri, LLC	45-5080567	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Grace Hospice of Illinois, LLC	81-5129923	IL
Seniorcorps Peninsula, LLC	26-4435532	VA
R&C Healthcare, LLC	33-1179031	TX
Pinnacle Senior Care of Missouri, LLC	46-0861469	MI
Country Style Health Care, LLC	03-0556422	TX
Phoenix Home Health Care, LLC	14-1878333	DE
Traditional Home Health Services, LLC	75-2635025	TX
Family Nurse Care, LLC	38-2751108	MI
Family Nurse Care II, LLC	20-5108540	MI

Family Nurse Care of Ohio, LLC	20-3920947	MI	
Pinnacle Senior Care of Wisconsin, LLC	46-4229858	WI	
Pinnacle Senior Care of Indiana, LLC	81-1565426	MI	
Pinnacle Home Care, LLC	76-0713516	TX	
North Florida Health Services, Inc	59-3519060	FL	
Pinnacle Sr. Care of Kalamazoo, LLC	47-1742728	MI	
Hospice DME Company, LLC	46-1734288	MI	
Rapid Respiratory Services, LLC	20-4364776	DE	
USMM Accountable Care Network, LLC	46-5730959	DE	
USMM Accountable Care Partners, LLC	46-5735993	DE	
USMM Accountable Care Solutions, LLC	46-5745748	DE	
USMM ACO, LLC	45-4165480	MI	
USMM ACO Florida, LLC	45-4157180	MI	
USMM ACO North Texas, LLC	45-4154905	MI	
Pinnacle Senior Care of Illinois, LLC	83-3534462	IL	
VPA, P.C.	38-3176990	MI	
VPA of Texas	20-2386997	MI	
Health Net, LLC	47-5208076	DE	
Health Net of California, Inc.	95-4402957	CA	
Health Net Life Insurance Company	73-0654885	CA	66141
Health Net Life Reinsurance Company	98-0409907	CYM	
Health Net of California Real Estate Holdings, Inc.	54-2174069	CA	
Managed Health Network, LLC	95-4117722	DE	
Managed Health Network	95-3817988	CA	
MHN Services, LLC	95-4146179	CA	
Health Net Federal Services, LLC	68-0214809	DE	
MHN Government Services LLC	42-1680916	DE	
MHN Global Services, Inc.	51-0589404	DE	
MHN Government Services-Guam, Inc.	90-0889803	DE	
MHN Government Services-International, Inc.	90-0889825	DE	
MHN Government Services-Puerto Rico, Inc.	90-0889815	DE	
Network Providers, LLC (10%)	88-0357895	DE	
Health Net Preferred Providers, LLC	61-1388903	DE	
Health Net Veterans, LLC	35-2490375	DE	
Network Providers, LLC (90%)	88-0357895	DE	
QualMed, Inc.	84-1175468	DE	
Health Net Health Plan of Oregon, Inc.	93-1004034	OR	95800
QualMed Plans for Health of Western Pennsylvania, Inc.	23-2867300	PA	
Pennsylvania Health Care Plan, Inc.	25-1516632	PA	
Health Net Services Inc.	94-3037822	DE	
Health Net Community Solutions, Inc.	54-2174068	CA	

Health Net of Arizona, Inc.	36-3097810	AZ	95206
Health Net of Pennsylvania, LLC	n/a	PA	33200
QualMed Plans for Health of Pennsylvania, Inc.	23-2456130	PA	
FH Assurance Company	98-0150604	CYM	
Health Net Pharmaceutical Services	68-0295375	CA	
Health Net of Arizona Administrative Services, Inc.	86-0660443	AZ	
Health Net Community Solutions of Arizona, Inc.	81-1348826	AZ	15895
National Pharmacy Services Inc.	84-1301249	DE	10090
Integrated Pharmacy Systems, Inc. (90%)	23-2789453	PA	
Health Net Access, Inc.	46-2616037	AZ	
MHS Consulting, International, Inc	20-8630006	DE	
PRIMEROSALUD, S.L.	Foreign	ESP	
MH Services International Holdings (UK) Limited	Foreign	GBR	
MH Services International (UK) Limited	Foreign	GBR	
Centene UK Ltd.	Foreign	GBR	
The Practice (Group) Limited	Foreign	GBR	
Villa Maria del Triuinfo Salud S.A. C. (5%)	Foreign	PER	
Callao Salud S.A.C.	Foreign	PER	
Centene Europe Finance Company Limited	Foreign	MLT	
Centene Health Plan Holdings, Inc.	82-1172163	DE	
Ambetter of North Carolina, Inc.	82-5032556	NC	16395
Carolina Complete Health Holding Company Partnership (80%)	82-2699483	DE	10393
Carolina Complete Health, Inc.	82-2699332	NC	16526
New York Quality Healthcare Corporation	82-3380290	NY	10320
Salus Administrative Services, Inc.	55-0878053	NY	
Salus IPA, LLC	82-0802846	NY	
Calibrate Acquisition Co	82-4670677	DE	
Community Medical Holdings Corp	47-4179393	DE	
Access Medical Acquisition, Inc.	46-3485489	DE	
Access Medical Group of North Miami Beach, Inc.	45-3191569	FL	
Access Medical Group of Mami, Inc.	45-3191719	FL	
Access Medical Group of Mialmi, inc. Access Medical Group of Hialeah, Inc.	45-3192283	FL	
Access Medical Group of Mestchester, Inc. Access Medical Group of Westchester, Inc.	45-3192203	FL	
Access Medical Group of Opa-Locka, Inc.	45-3505196	FL	
Access Medical Group of Opa-Locka, Inc. Access Medical Group of Perrine, Inc.	45-3192955	FL	
Access Medical Group of Florida City, Inc.	45-3192366	FL	
Access Medical Group of Florida City, Inc. Access Medical Group of Tampa, Inc.	82-1737078	FL	
Access Medical Group of Tampa, Inc. Access Medical Group of Tampa II, Inc.	82-1750978	FL	
	82-1733315	FL	
Access Medical Group of Tampa III, Inc. Interpreta Holdings, Inc. (80.1%)	82-1773315 82-4883921	DE	
Interpreta Holdings, Inc. (60.1%)	46-5517858	DE	
interpreta, inc.	40-3317030	DE	

Patriots Holding Co	82-4581788	DE	
RxAdvance Corporation (27.83%)		DE	
Next Door Neighbors, LLC	32-2434596	DE	
Next Door Neighbors, Inc.	83-2381790	DE	
Centene Venture Company Michigan	83-2446307	MI	
Centene Venture Company Illinois	83-2425735	IL	16505
Centene Venture Company Kansas	83-2409040	KS	16528
Centene Venture Company Florida	83-2434596	FL	16499
HealthEC, LLC (12.8%)			
Arch Personalized Medicine Initiative, LLC (50%)	83-4144116	MO	
Social Health Bridge, LLC	83-4205348	DE	
Social Health Bridge Trust		DE	

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board.	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to	1	Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent. Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)			Entity(ies)/Person(s)		*
0000	Group Hame	0000	rambol	TROOD	Oiit	New York Stock	Of 7 trimates	Location	Little	Shareholders/Board of	Shareholders/Boa		Shareholders/Board	(1/11)	
01295	Centene Corporation	00000	42-1406317		0001071739		Centene Corporation	DE	UDP	Directors	rd of Directors	100.0	of Directors	l N	0
0.200	00.10.00 00.00.00.00.	00000				Z.xo.i.a.i.go.	Bankers Reserve Life Insurance	1		300.0	14 01 511001010	1	Centene	1	
01295	Centene Corporation	71013	39-0993433				Company of Wisconsin	w ı	IA	Centene Corporation.	Ownership	100 0	Corporat ion	l N	0
							1			Bankers Reserve Life					
							Health Plan Real Estate			Insurance Company of			Centene	1 1	
01295	Centene Corporation	00000	46 - 2860967				Holding, Inc	MO	NIA	Wisconsin	Ownership	17.0	Corporation	l yl	0
0.200		00000									0 0 p	1	Centene		
01295	Centene Corporation	12315	20-3174593				Peach State Health Plan. Inc	GA	LA	Centene Corporation	Ownership	100.0	Corporation	l N	0
							Health Plan Real Estate						Centene		
01295	Centene Corporation	00000	46 - 2860967				Holding, Inc.	MO	NIA	Peach State Health Plan, Inc	Ownership	21.0	Corporation	l yl	0
]						[g,						Centene		
01295	Centene Corporation	15713	46-4829006				lowa Total Care, Inc	I A	LA	Centene Corporation	Ownership	100.0	Corporat ion	l N	0
		i i					Buckeye Community Health Plan,						Centene		
01295	Centene Corporation	11834	32-0045282				Inc	OH	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
		i i					Health Plan Real Estate]		Buckeye Community Health			Centene		
01295	Centene Corporation	00000	46-2860967				Holding, Inc.	MO	NIA	Plan. Inc	Ownership	13.0	Corporation	Y	0
							3,						Centene		
01295	Centene Corporation	12959	20-5693998				Absolute Total Care, Inc	SC	LA	Centene Corporation	Ownership	100.0	Corporat ion	l N	0
							Health Plan Real Estate						Centene		
01295	Centene Corporation	00000	46-2860967	l			Holding, Inc.	MO	NIA	Absolute Total Care, Inc	Ownership	1.0	Corporation	lу	0
		i i					Coordinated Care Corporation						Centene		
01295	Centene Corporation	95831	39-1821211				d/b/a Managed Health Services	IN	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
	'						Health Plan Real Estate			Coordinated Care Corporation	'		Centene	i i	i
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	d/b/a Managed Health Services	Ownership	15.0	Corporation	Υ	0
	'	İ					Healthy Washington Holdings.				'		Centene	l l	
01295	Centene Corporation	00000	46-5523218				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
	'						Coordinated Care of Washington,			Healthy Washington Holdings,			Centene	i i	i
01295	Centene Corporation	15352	46-2578279				Inc	WA		Inc	Ownership	100.0	Corporation	N	0
	· ·						Managed Health Services				, i		Centene	1 1	
01295	Centene Corporation	96822	39-1678579				Insurance Corp	W I	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
							Health Plan Real Estate			Managed Health Services	·		Centene		
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	Insurance Corp	Ownership	2.0	Corporation	Y	0
													Centene	1 1	
01295	Centene Corporation	60078	86-0819817				Hallmark Life Insurance Co	AZ	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
													Centene	1 1	
01295	Centene Corporation	95647	74-2770542				Superior HealthPlan, Inc	TX	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
							Health Plan Real Estate						Centene	1 1	
01295	Centene Corporation	00000	46-2860967	.			Holding, Inc	MO	NIA	Superior HealthPlan, Inc	Ownership	21.0	Corporation	[Y	0
							L						Centene		
01295	Centene Corporation	00000	27-0916294	.			Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
0.4005							Louisiana Healthcare	l	l	Healthy Louisiana Holdings			Centene	[I	
01295	Centene Corporation	13970	27 - 1287287				Connections, Inc	LA	I A	LLC	Ownership	100.0	Corporat ion	[N	0
0.4005			00 0570046				l., s		l				Centene	[I	
01295	Centene Corporation	13923	20-8570212				Magnolia Health Plan Inc	MS	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
04005		14050	07.0400450				L	l	1			100.0	Centene	l	_
01295	Centene Corporation	14053	27 - 2186150	.			IlliniCare Health Plan, Inc	IL	I A	Centene Corporation	Ownership	100.0	Corporation]N	0

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of Securities					Type of Control (Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent. Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N)	*
Oode	Group Harrie	Couc	Number	ROOD	Oiix	internationar)	Health Plan Real Estate	Location	Littly	(Name of Emity/1 cross)	milderice, Other)	r creentage	Centene	(1/14)	
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	IlliniCare Health Plan, Inc	Ownership	5.0		l yl	0
0.1200		00000					1				0 0 p		Centene		
01295	Centene Corporation	00000	26-0557093				Sunshine Health Holding LLC]FL	NIA	Centene Corporation	Ownership	100.0	Corporation	lN	0
	,										,		Centene		
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL		Sunshine Health Holding LLC	Ownership	100.0	Corporation	N	0
	·						Kentucky Spirit Health Plan,				· ·		Centene		
01295	Centene Corporation	14100	45-1294925				Inc	KY		Centene Corporation	Ownership	100.0	Corporation	N	0
							l						Centene	ll	
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc	MO	NIA	Centene Corporation	Ownership	95.0	Corporat ion	N	0
04005	Conton Connection	14040	45-2798041				Hama Chaha Haalibb Dlag Inc	MO	1.4	Haalabu Miaaausi Haldisa Isa	O	100 0	Centene	ا ا	0
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc Health Plan Real Estate	MO	I A	Healthy Missouri Holding, Inc	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	Home State Health Plan, Inc	Ownership	5.0		l v	0
01233	l		40-2000307				Sunflower State Health Plan,	J*************************************		Thome State hearth Fran, mc	Owner sirrp	J	Centene	'	
01295	Centene Corporation	14345	45-3276702				Inc	KS	LA	Centene Corporation	Ownership.	100 0	Corporation	l N	0
01200	Contone Corporation	1 10 10	10 02/0/02					1	1	contone corporation	о штот оттр	1	Centene		
01295	Centene Corporation	14226	45-4792498				Granite State Health Plan. Inc	NH	I	Centene Corporation	Ownership	100.0		l	0
	· ·						California Health and Wellness						Centene		
01295	Centene Corporation	00000	46-0907261				Plan	CA	NIA	Centene Corporation	Ownership	100.0		N	0
													Centene		
01295	Centene Corporation	10769	30-0312489				Michigan Complete Health, Inc	MI	RE	Centene Corporation	Ownership	100.0		N	0
04005	040	40054	45 5500544				Western Sky Community Care,		1.4	0	O	400.0	Centene		
01295	Centene Corporation	16351	45-5583511	-			Inc	NM	I A	Centene Corporation	Ownership	100.0		N	
01295	Centene Corporation	16143	20-4761189				SilverSummit Healthplan, Inc	NV	II A	Centene Corporation	Ownership	100.0	Centene Corporation	I ,	0
01293	l centene corporation	10143	20-4/01109				i sirversummir nearthpran, mc	JNV	I A	Certene corporation	Ownership	100.0	Centene	JN	
01295	Centene Corporation	00000	22-3292245				University Health Plans, Inc	NJ	NIA	Centene Corporation	Ownership	100.0		l N	0
01200	Contone Corporation	00000					l limitorer y ricaren r rano, mo		1		0 11101 0111 p		Centene		
01295	Centene Corporation	00000	20-0483299				Agate Resources, Inc.	OR	NIA	Centene Corporation	Ownership	100.0		И	0
	'						Trillium Community Health Plan,			İ '	'		Centene	i i	
01295	Centene Corporation	12559	42-1694349				Inc	OR	I A	Agate Resources, Inc.	Ownership	100.0		N	0
							l <u>-</u>						Centene	ll	
01295	Centene Corporation	15902	47 - 5123293				Nebraska Total Care, Inc	NE	I A	Centene Corporation	Ownership	100.0		N	0
04005	Conton Connection	10044	47 - 5340613				Pennsylvania Health & Wellness,	D.	1.4	Contana Consentina	O	100 0	Centene	ا ا	0
01295	Centene Corporation	16041	47 - 5340613				Inc Superior HealthPlan Community	PA	I A	Centene Corporation	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	15912	47 - 5664832				Solutions, Inc	TX	LA	Centene Corporation	Ownership.	100 0	Corporation	l M	0
01233	Contone corporation	10012	47 -3004032				Sunshine Health Community	/ /		Contone corporation	0 #1101 3111 p	1100.0	Centene		
01295	Centene Corporation	15927	47 - 5667095				Solutions. Inc.	FL	LA	Centene Corporation	Ownership	100.0		l N	0
0.200	Contone Conport at 1 Contone	1002					Buckeye Health Plan Community	1			0 0 p		Centene		
01295	Centene Corporation	16112	47 - 5664342				Solutions, Inc.	0H	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
	<u>'</u>						Arkansas Health & Wellness			· ·		1	Centene		
01295	Centene Corporation	16130	81-1282251				Health Plan, Inc	AR	I A	Centene Corporation	Ownership	100.0	Corporation	[N	0
			00 1010005				Arkansas Total Care Holding		l	Arkansas Health & Wellness			Centene		
01295	Centene Corporation	00000	38-4042368				Company, LLC	DE	NIA	Health Plan, Inc.	Ownership	49.0		N	0
04205	Contono Cornoretias	10050	00 0640007				Arkenses Total Comp. Inc.	A.D.	1.4	Arkansas Total Care Holding	Ownershi-	400.0	Centene		
01295	Centene Corporation	16256	82-2649097				Arkansas Total Care, Inc	AR	I A	Company, LLC	Ownership	100.0	Corporation	[N	U

							-						T		
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
0		NAIC	ID	Fadaval		Publicly	Names of	Damiallian	to	Discretic Constrails of his	Management,	Ownership	Lillian ata Cantanilian	Filing	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent, Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide	Ultimate Controlling Entity(ies)/Person(s)	Required?	*
Code	Group Name	Code	Nullibei	KSSD	CIK	international)	Of Affiliates	Location	Entity	(Name of Entity/Ferson)	inilidence, Other)	reiceillage	Centene	(1/N)	
01295	Centene Corporation	00000	81-2788043				Healthy Oklahoma Holdings, Inc.	DE	NIA	Centene CorporationHealthy Oklahoma Holdings.	Ownership	100.0		N	0
01295	Centene Corporation	00000	81-3121527				Oklahoma Complete Health Inc	0K	NIA	Inc	Ownership	100.0		N	0
01295	Centene Corporation	00000	20-4980875				Bridgeway Health Solutions, LLC. Bridgeway Health Solutions of	DE	NIA	Centene Corporation Bridgeway Health Solutions.	Ownership	100 .0		N	0
01295	Centene Corporation	16310	20-4980818				Arizona Inc.	AZ	l A	LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	36-2979209				Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	80799	06-0641618				Celtic Insurance Company	IL	A	Celtic Group, Inc	.Ownership	100.0		N	0
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc	MS	A	Celtic Insurance Company	Ownership	100.0		N	0
01295	Centene Corporation	İ	36-4802632				Ambetter of Peach State Inc	GA	I A	Celtic Insurance Company	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation		27 - 2221367				Novasys Health, Inc CeltiCare Health Plan Holdings	DE	NIA	Celtic Group, Inc	.Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	26-4278205				LLC	DE	NIA	Celtic Group, Inc	.Ownership	100.0	Corporat ion	N	
01295	Centene Corporation	13632	26-4818440				CeltiCare Health Plan of Massachusetts, Inc	MA	I A	CeltiCare Health Plan Holdings LLC	Ownership	100.0	Centene Corporation	N	0
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	0
01295	Centene Corporation	00000	20-0057283				CMC Real Estate Co. LLC	DE	NIA	Centene Management Company	Ownership	100.0		N	0
01295	Centene Corporation	00000	26-4094682				Centene Center LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Centene Corporation Centene	N	0
01295	Centene Corporation	00000	82-1816153				Centene Center I, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	47 - 5156015				Centene Center II, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	82-3210933				Centene Center III, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0		N	0
01295	Centene Corporation	i i	46-4234827				CMC Hanley, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	45-5431787				GPT Acquisition LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	CorporationCentene	N	0
01295	Centene Corporation		46-2794037				LSM Holdco, Inc	DE	NIA	Centene Corporation	Ownership	100.0		N	0
01295	Centene Corporation	İ	46-2798132				Lifeshare Management Group, LLC. Arkansas Total Care Holding	NH	NIA	LSM Holdco, IncLifeshare Management Group,	.Ownership	100.0		N	0
01295	Centene Corporation	İ	38-4042368				Company, LLC	DE	NIA	LLC	Ownership	25.0	Corporation Centene	N	0
01295	Centene Corporation		20-2074217				CCTX Holdings, LLC	DE	NIA	Centene Corporation	.Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	ТХ	NIA	CCTX Holdings, LLC	Ownership	1.0	Corporation	N	0

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N)	*
						,				(**************************************		- creeninge	Centene	(,	
01295	Centene Corporation	00000 2	20-2074277				Centene Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
							l						Centene	ll	
01295	Centene Corporation	00000 7	74 - 2810404				Centene Company of Texas, LP	ТХ	NIA	Centene Holdings, LLC	Ownership	99.0	Corporation	N	0
01295	Centene Corporation	00000	13 - 1795436				MHS Travel & Charter, Inc	WI	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	, N	0
01295	Centene Corporation	000002	+3 - 17 93430				IMMO Travel & Charter, Inc	WI	NTA	Centene Corporation	Ownership	100.0	Centene	JJN	
01295	Centene Corporation	00000	16-4855483				Health Care Enterprises, LLC	DF	NIA	Centene Corporation	Ownership	100 0	Corporation	l N	0
01200	00110110 001 por action	i i					linearth dard Enterprises, Eze		1	Contone Corporation	. oo r o p		Centene	'	
01295	Centene Corporation	00000 2	22-3889471				Envolve Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
							Cenpatico Behavioral Health,						Centene		
01295	Centene Corporation	000006	68 - 0461584				LLC	CA	NIA	Envolve Holdings, Inc	Ownership	100.0		N	0
01205	Contona Corneration	000008	36-0782736				CBHSP Arizona, Inc	AZ	NIA	Cenpatico Behavioral Health,	Ownership	100.0	Centene		0
01295	Centene Corporation	00000	00-0702730				Conor Al Izona, Inc	AZ	NTA	Cenpatico Behavioral Health,	Ownership	100.0	Corporation Centene	JN	
01295	Centene Corporation	000002	17 - 2595704				Cenpatico of California, Inc	CA	NIA	III C	Ownership	100 0	Corporation	l N	0
0.200	Contone Conpension Contone C		2000.01				Integrated Mental Health		1	Cenpatico Behavioral Health,			Centene		
01295	Centene Corporation	00000 7	74-2892993				Management, L.L.C	ТХ	NIA	LLC	Ownership	100.0	Corporation	N	0
	·						Integrated Mental Health			Integrated Mental Health			Centene		
01295	Centene Corporation	00000 7	74 - 2785494				Services	ТХ	NIA	Management, L.L.C	Ownership	100.0	Corporat ion	N	0
04005	Conton Connection	00000	00 4004400				Cenpatico Behavioral Health of	AZ	NII A	Cenpatico Behavioral Health,	O	100.0	Centene		0
01295	Centene Corporation	00000 2	20 - 1624120				Arizona, LLC	AZ	NIA	Cenpatico Behavioral Health	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	30-0879942				Cenpatico of Arizona Inc.	A7	NIA	of Arizona. LLC	Ownership.	100.0	Corporation	l N	0
0 1200	Contone Corporation	00000	50 00700 1 2				Compartor of Artzona mo.		1	01 71 72010, 220	, o iiii o ii o ii i p		Centene	1	
01295	Centene Corporation	00000 3	37 - 1788565				Envolve, Inc	DE	NIA	Envolve Holdings, Inc	Ownership	100.0	Corporation	NN	
	,						AHA Administrative Services,				,		Centene		
01295	Centene Corporation	00000	17 - 4545413				LLC	AL	NIA	Envolve, Inc	Ownership	100.0	Corporat ion	NN	0
01205	Contona Corneration	00000	17 - 3454898				Envolve – New York, Inc	NY	NIA	Envolve, Inc.	Ownership	100.0	Centene	, N	0
01295	Centene Corporation	000002	+/ -3434090				Community Care of Central	JN Y	NTA	Envoive, inc	Ownership	100.0	Corporation Centene	NI	
01295	Centene Corporation	00000	32-2288767				Colorado, LLC	DE	NIA	Envolve, Inc.	Ownership	100 0	Corporation	l N	0
0.200							,		1				Centene		
01295	Centene Corporation	000000	06-1476380				Envolve PeopleCare, Inc	DE	NIA	Envolve Holdings, Inc	Ownership	100.0	Corporation	N	0
		l					L						Centene		
01295	Centene Corporation	00000	47 - 2516714				LiveHealthier, Inc	DE	NIA	Envolve PeopleCare, Inc	Ownership	100.0	Corporat ion	N	0
01295	Centene Corporation	000006	61-1846191				Envolve Benefits Options, Inc	DE	NIA	Envolve Holdings, Inc	Ownership.	100.0	Centene Corporation	l M	0
01295	Centene Corporation	00000) 1 - 1040 19 1				Envolve benefits options, inc		NIA	Envolve Benefits Options,	Ownership	100.0	Centene	IN	
01295	Centene Corporation	00000 2	20-4730341				Envolve Vision Benefits. Inc.	DE	NIA	Inc.	Ownership	100 0	Corporation	l N	0
							Envolve Captive Insurance]]]		Centene	[
01295	Centene Corporation	00000 3	36-4520004				Company, Inc	SC	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0		N	
	·						<u></u>				l		Centene		
01295	Centene Corporation	95302 7	75 - 2592153				Envolve Vision of Texas, Inc	TX	I A	Envolve Vision Benefits, Inc.	Ownership	100.0	Corporat ion	[N	0
01295	Centene Corporation	00000 2	20-4773088				Envolve Vision, Inc	DE	NIA	Envolve Vision Benefits, Inc.	Ownerchin	100.0	Centene	l NI	0
01290	Trentene corboration	00000 2	<u> </u>				TEHNOTAE AISTON, INC	DE	NIA	EUNOTAE AISTON DENETITS, INC.	. ownership	100.0	Corporation	N	U

		_	T .												
1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities Exchange if			Relationship		(Ownership, Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage		(Y/N)	*
01295	Centene Corporation	00000	83-2460878				Envolve Vision IPA of New York,	NY	NIA	Envolve Vision. Inc	Ownership	100.0	Centene Corporation	l N	٥
01200	deritation derporation						THIC.			, , , , , , , , , , , , , , , , , , , ,	,	100.0	Centene		
01295	Centene Corporation	00000	65-0094759				Envolve Vision of Florida, Inc	FL	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0		N .	0
04005	Contana Consenstina	00000	20 4004044				Favolus Tatal Visias Inc	DE	ALL A	Cavalya Visian Danafita Inc.	O	100 0	Centene	,	0
01295	Centene Corporation	00000	20-4861241				Envolve Total Vision, Inc	DE	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	82-2908582				Envolve Optical, Inc	DE	NIA	Envolve Vision Benefits, Inc.	Ownership.	100.0	Corporation	l	0
	, '									Envolve Benefits Options,			Centene		
01295	Centene Corporation	00000	46-2783884				Envolve Dental, Inc	DE	NIA	Inc	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	81-2969330				Envolve Dental of Florida. Inc	FL	NIA	Envolve Dental. Inc	Ownership	100 0	Centene Corporation	l N	٥
01200	00170110 001701 011								1	Liverye Berreat, The	0 11101 0111 p		Centene		
01295	Centene Corporation	16106	81-2796896				Envolve Dental of Texas, Inc	TX	I A	Envolve Dental, Inc	Ownership	100.0		N	0
01295	Contone Corneration	00000	83-1464482				Envolve Dental IPA of New York, Inc.	NY	NIA	Envolve Dental, Inc.	Ownership	100.0	Centene Corporation	,	
01295	Centene Corporation	00000	03-1404402				Envolve Pharmacy Solutions,	JNT]NTA	Elivorve Delitar, Ilic	Ownership	100.0	Centene	[
01295	Centene Corporation	00000	77 - 0578529				Inc	DE	NIA	Envolve Holdings, Inc	Ownership	100.0		N .	0
										Envolve Pharmacy Solutions,			Centene		
01295	Centene Corporation	00000	76-0511700				LBB Industries, Inc	TX	NIA	IncEnvolve Pharmacy Solutions,	Ownership	100.0		N .	0
01295	Centene Corporation	00000	75-2612875				RX Direct. Inc.	ТХ	NIA	Inc.	Ownership	100 0	Centene Corporation	l N	0
01200	,									Envolve Pharmacy Solutions,	0 11101 0111 p		Centene		
01295	Centene Corporation	00000	46-2307356				Envolve Pharmacy IPA, LLC	NY	NIA	Inc	Ownership	100.0		N .	0
01295	Contono Corneration	00000	90-0636938				Casenet LLC.	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	l M	
01295	Centene Corporation	00000	90-0030936				Loasenet LLo	D⊑	NTA	Centene Corporation	Ownersinp	100.0	Centene]	
01295	Centene Corporation	00000					Casenet S.R.O.	CZE	NIA	Casenet LLC	Ownership	100.0		N .	0
0.4005													Centene]	
01295	Centene Corporation	00000	82-5316510				MHM Services, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	90-0766502				Centurion LLC	DE	NIA	MHM Services. Inc.	Ownership.	100.0		l N	0
	'								1		,		Centene		
01295	Centene Corporation	00000	81-4228054				Centurion of Arizona, LLC	AZ	NIA	Centurion LLC	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	47 - 1686283				Centurion of Vermont. LLC	VT	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	l N	0
01233	centene corporation	00000	47 - 1000203				Verificity of Verificity, Ele		NI /\	Centurion ELC	Ownersinp		Centene		
01295	Centene Corporation	00000	47 - 2967381				Centurion of Mississippi, LLC	MS	NIA	Centurion LLC	Ownership	100.0		N .	0
04005	Contana Consenstina	00000	20 0752054				Continuing of Tourness IIIC	TAI	ALL A	Continuina III C	O	100 0	Centene		0
01295	Centene Corporation	00000	30 - 0752651				Centurion of Tennessee, LLC	TN	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	46-2717814				Centurion of Minnesota, LLC	MN	NIA	Centurion LLC	Ownership	100.0	Corporation	N.	
	' ' '						Centurion Correctional				'		Centene		
01295	Centene Corporation	00000	81-1161492				Healthcare of New Mexico, LLC	NM	NIA	Centurion LLC	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	81-0687470				Centurion of Florida, LLC	FI	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	N	0
31200	30									35	'		Centene		
01295	Centene Corporation	00000	81-4938030				Centurion of Maryland, LLC	MD	NIA	Centurion LLC	Ownership	100.0	Corporation	N .	0

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	_		·			Name of Securities	_				Type of Control (Ownership,				
		NAIC				Exchange if Publicly	Names of		Relationship to		Board, Management,	If Control is Ownership		Is an SCA Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	00000	81-5429405				 Centurion of Philadelphia, LLC	PA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	l N	
01295	Cerreile Corporation	00000	01-0429400	-			Centurion Detention Health		NIA	Centurion LLC	Ownership	100.0	Centene	JJN	
01295	Centene Corporation	00000	82-4735175				Services, LLC	DE	NIA	Centurion LLC	Ownership	100.0		N	0
04005		00000	00 4000400					D.E.				400.0	Centene	۱., ا	
01295	Centene Corporation	00000	82-4823469				Centurion of New Hampshire, LLC.	DE	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	54 - 1856340				MHM Correctional Services, LLC	DE	NIA	MHM Services, Inc.	Ownership.	100.0	Corporation	N	0
	İ										İ '		Centene		
01295	Centene Corporation	00000	51-0620904				MHM Services of California, LLC.	CA	NIA	MHM Services, Inc.	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	60-0002002				MHM Solutions, LLC	DE	NIA	MHM Services, Inc	Ownership	100.0	Centene Corporation	l N	0
01200	dontono dorporatron						Thin Gorderons, ELO				. o #1101 o111 p	100.0	Centene		
01295	Centene Corporation	00000	26 - 1877007				Forensic Health Services, LLC	DE	NIA	MHM Services, Inc	Ownership	100.0		N	0
01295	Centene Corporation	00000	46-1734817				 MHM Health Professionals, LLC	DE	NIA	MHM Services, Inc	Ownership.	100.0	Centene Corporation	l N	0
01295	Cerreile Corporation	00000	40-17-34017				Specialty Therapeutic Care		NTA	IMINIM Services, INC	. Owner Strip	100.0	Centene	JJN	
01295	Centene Corporation	00000	27 - 3617766				Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
		l								Specialty Therapeutic Care	l'		Centene	l .J	
01295	Centene Corporation	00000	73 - 1698808				Specialty Therapeutic Care, LP Specialty Therapeutic Care, GP,	TX	NIA	Holdings, LLCSpecialty Therapeutic Care	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	73-1698807				ITC	TX	NIA	Holdings, LLC	Ownership	100 0	Corporation	l N	0
	'	i i								Specialty Therapeutic Care,	<u>'</u>		Centene		
01295	Centene Corporation	00000	73 - 1698808				Specialty Therapeutic Care, LP	ТХ	NIA	GP, LLC	Ownership	0.0	Corporat ion	N	0
01295	Centene Corporation	00000	80-0856383				 AcariaHealth Solutions, Inc	DE	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	l M	0
01233	l centene corporation	00000	00-000000				Notal ranearth Solutions, Inc		N I /\	Specialty Therapeutic Care	, owner sirrp	100.0	Centene	J	
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc	DE	NIA	Holdings, LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	27 - 1599047				 AcariaHealth Pharmacy #14, Inc	CA	NIA	AcariaHealth. Inc.	Ownership	100.0	Centene Corporation	l N	0
01295	Cerreile Corporation	00000	21 - 1099041				Acarranearth Fhanilacy #14, Thc		NTA	Acarranearth, mc	. Owner Strip	100.0	Centene	J	
01295	Centene Corporation	00000	20-8192615				AcariaHealth Pharmacy #11, Inc	ТХ	NIA	AcariaHealth, Inc	Ownership	100.0		N	0
04005	0	00000	07 0705404				A	AIV/	NII A	Association (About the	O	400.0	Centene		
01295	Centene Corporation	00000	27 - 2765424				AcariaHealth Pharmacy #12, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0		NN	0
	<u>'</u>	İ İ											Centene	i .i	
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	27 - 3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth. Inc.	Ownership	100.0	Centene Corporation	l N	0
	'						, , ,		1	, , , , , , , , , , , , , , , , , , , ,	'		Centene	[
01295	Centene Corporation	00000	20 - 8235695				New York Rx, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0		N	0
01295	Centene Corporation.	00000	20-0873587				Foundation Care, LLC	MO	NIA	AcariaHealth. Inc.	Ownership.	80 0	Centene Corporation	NI NI	
01233	Contene Corporation	i i					U.S. Medical Management	JWI∪		Note Tailed I (II, Tille	. Omiiai 2111h		Centene]IN	
01295	Centene Corporation	00000	27 - 0275614				Holdings, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
04005	04	00000	00 0450040				III O Madical Massacrat 110	DE	NII A	U.S. Medical Management	O	00.0	Centene	[]	_
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Holdings, Inc	Ownership	J20.0	Corporation	[N	U

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	_		·			Name of Securities Exchange if	Nonconf	-	Relationship		Type of Control (Ownership, Board,	If Control is		Is an SCA	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Centene Corporation	Ownership	80.0	Centene Corporation Centene	N	0
01295	Centene Corporation	00000	31-1733889				RMED, LLC	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	47 - 2138680				IAH of Florida, LLC	FL	NIA	RMED, LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	51-0581762				Heritage Home Hospice, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	20-2827613				Grace Hospice of Austin, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	20-1530070				ComfortBrook Hospice, LLC	0H	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	20-4996551				Comfort Hospice of Texas, LLC Grace Hospice of San Antonio,	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	20-2827526				LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	CorporationCentene	N	0
01295	Centene Corporation	00000	45-0679248				LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	45-0634905				Grace Hospice of Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	·	100.0	CorporationCentene	N	0
01295	Centene Corporation	00000	45-5080637				Grace Hospice of Virginia, LLC Comfort Hospice of Missouri,	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	45-5080567				LLC.	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	46 - 1708834				Grace Hospice of Wisconsin, LLC.	MI		U.S. Medical Management, LLC	·	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	81-5129923				Grace Hospice of Illinois, LLC	IL		U.S. Medical Management, LLC	·	100 . 0	Corporation Centene	N	0
01295	Centene Corporation		26-4435532				Seniorcorps Peninsula, LLC	VA		U.S. Medical Management, LLC		100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	33-1179031				R&C Healthcare, LLCPinnacle Senior Care of	ТХ		U.S. Medical Management, LLC	,		Corporation Centene	N	0
01295	Centene Corporation	00000	46-0861469				Missouri, LLC	MI		U.S. Medical Management, LLC	,	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	03-0556422				Country Style Health Care, LLC	ТХ		U.S. Medical Management, LLC	·	100.0	Centene	N	0
01295	Centene Corporation	00000	14-1878333				Phoenix Home Health Care, LLC Traditional Home Health	DE		U.S. Medical Management, LLC		100.0	Corporation Centene]N	0
01295	Centene Corporation	00000	75-2635025				Services, LLC	ТХ		U.S. Medical Management, LLC		100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	38-2751108				Family Nurse Care, LLC	MI		U.S. Medical Management, LLC	·	100.0	Centene	N	0
01295	Centene Corporation	İ	20-5108540				Family Nurse Care II, LLC	MI		U.S. Medical Management, LLC			Corporation Centene	N	0
01295	Centene Corporation	l i	20-3920947				Family Nurse Care of Ohio, LLC Pinnacle Senior Care of	MI		U.S. Medical Management, LLC	·		Corporation Centene	N	0
01295	Centene Corporation	00000	46-4229858				Wisconsin, LLC	W	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group	<u> </u>	Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates Pinnacle Senior Care of	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s) Centene	(Y/N)	*
01295	Centene Corporation	00000	81-1565426				Indiana. LLC	MI	NIA	U.S. Medical Management, LLC	Ownershin	100.0	Corporation	l _N	0
01200	,						marana, EEo			10.0. mod rod i managomorit , EEo	0 milor 5111 p		Centene		
01295	Centene Corporation	00000	76-0713516				Pinnacle Home Care, LLC	ТХ	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation		0
0.4005		00000	50 0540000				North Florida Health Services,					400.0	Centene	ll	
01295	Centene Corporation	00000	59-3519060				Pinnacle Sr. Care of Kalamazoo.	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	47 - 1742728				IIIC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	l N	0
0.200	' '							1		To a moure of management, 220			Centene		
01295	Centene Corporation	00000	46 - 1734288				Hospice DME Company, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0
04005	Contana Consenstina	00000	20-4364776				Desid Beerinstern Commisse 110	DE	NII A	III C Madical Management III C	O	100 0	Centene	الما	
01295	Centene Corporation	00000	20-4304//0				Rapid Respiratory Services, LLC. USMM Accountable Care Network.	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	46-5730959				LLC.	DE	NIA	U.S. Medical Management, LLC	Ownership.	100.0	Corporation	l	0
	' '						USMM Accountable Care Partners,				'		Centene		
01295	Centene Corporation	00000	46-5735993				LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	46 - 5745748				USMM Accountable Care Solutions, LLC	DE	NIA	U.S. Medical Management, LLC	Ownorchin	100.0	Centene Corporation		0
01295	Centene Corporation	00000	40-3743746				. 5010(1018, LLC	J	N I A	0.5. Medicai Management, LLC	Ownership	100.0	Centene	[
01295	Centene Corporation	00000	45-4165480				USMM ACO, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0		l	0
	. '												Centene		
01295	Centene Corporation	00000	45-4157180				USMM ACO Florida, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	45-4154905				USMM ACO North Texas, LLC	M1	NIA	U.S. Medical Management, LLC	Ownershin	100.0	Centene Corporation	_N	٥
01200	ourrone desperation	00000	10 110 1000				Pinnacle Senior Care of			10.0. mod rod r managomorte, EEo	0 11101 0111 p		Centene		
01295	Centene Corporation	00000	83-3534462				Illinois, LLC	IL	NIA	U.S. Medical Management, LLC	Ownership	100.0			0
04005	Contana Consenstina	00000	20 2470000				VPA, P.C	MI	NII A	Conton Connection	O	100 0	Centene	الما	
01295	Centene Corporation	00000	38-3176990				I VPA, P.C	WI I	NIA	Centene Corporation	Ownership	100.0	Corporation Centene]	
01295	Centene Corporation	00000	20-2386997				VPA of Texas	MI	NIA	Centene Corporation	Ownership	100.0	Corporation	l	0
İ	·									·	·		Centene		
01295	Centene Corporation	00000	47 - 5208076				Health Net, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	95-4402957				Health Net of California, Inc.	CA	NIA	Health Net. LLC	Ownership	100 0	Centene Corporation	l N	0
01233	deritaria derparatifon	00000	30-4402337				Health Net Life Insurance	on		Health Net of California.	Owner 3111 P		Centene		
01295	Centene Corporation	66141	73-0654885				Company	CA	A	Inc	Ownership	100.0	Corporation		0
0.4005		00000	00 0400007				Health Net Life Reinsurance	0)///		Health Net of California,		400.0	Centene	ll	
01295	Centene Corporation	00000	98-0409907				Company Health Net of California Real	CYM	NIA	Inc Health Net of California.	Ownership	100.0	Corporation Centene	[N	0
01295	Centene Corporation	00000	54-2174069				Estate Holdings, Inc.	CA	NIA	Inc.	Ownership	100.0	Corporation	l N	0
	·]				Centene		
01295	Centene Corporation	00000	95-4117722				Managed Health Network, LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	95-3817988				 Managed Health Network	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Centene Corporation	l M	
01290	Contone Corporation	00000	90 - 3011900				I manayeu nearth Network	bA	N I M	Imaliayed Health Network, LLC	Owner 2111h	100.0	Centene	JN -	
01295	Centene Corporation	00000	95-4146179				MHN Services, LLC	CA	NIA	Managed Health Network, LLC	Ownership	100.0		N	0
	' '						Health Net Federal Services,	l	l	,	'		Centene		j
01295	Centene Corporation	00000	68-0214809				LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Corporation	[N].	0

								,		<u>, </u>			_		
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group	<u> </u>	Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling		
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person) Health Net Federal Services.	Influence, Other)	Percentage	Entity(ies)/Person(s) Centene	(Y/N)	*
01295	Centene Corporation	00000	42-1680916				MHN Government Services LLC	DE	NIA	III C	Ownership	100.0	Corporation	l N	0
01200	,						001011111011		1		0 11101 0111 p		Centene		
01295	Centene Corporation	00000	51-0589404				MHN Global Services, Inc	DE	NIA	MHN Government Services LLC	Ownership	100.0	Corporation	.	0
0.4005		00000	00 0000000				MHN Government Services-Guam,	55				400.0	Centene	1	
01295	Centene Corporation	00000	90-0889803				Inc MHN Government Services-	DE	NIA	MHN Government Services LLC	Ownership	100.0	Corporation Centene	.	
01295	Centene Corporation	00000	90-0889825				International. Inc.	DE	NIA	MHN Government Services LLC	Ownership.	100.0	Corporation	l N	0
01200	ourrend corporation	00000	00 0000020				MHN Government Services-Puerto		1		0 11101 0111 p		Centene		
01295	Centene Corporation	00000	90-0889815				Rico, Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0	Corporation		0
0.400.5								25		l			Centene	1	
01295	Centene Corporation	00000	88 - 0357895				Network Providers, LLC Health Net Preferred Providers.	DE	NIA	MHN Government Services LLC Health Net Federal Services.	Ownership	10.0	Corporation Centene	. N .	0
01295	Centene Corporation	00000	61-1388903				III.	DE	NIA	IIIC	Ownership	100.0	Corporation	l N	0
01200	Contone Corporation	00000	01 1000000						1	Health Net Federal Services,	0 11101 0111 p		Centene	1	
01295	Centene Corporation	00000	35-2490375				Health Net Veterans, LLC	DE	NIA	LLC.	Ownership	100.0	Corporation	.	0
0.4005		00000	00 0057005					55		Health Net Federal Services,			Centene	1	
01295	Centene Corporation	00000	88 - 0357895				Network Providers, LLC	DE	NIA	LLG	Ownership	90.0	Corporation Centene		
01295	Centene Corporation	00000	84-1175468				QualMed. Inc.	DE	NIA	Health Net. LLC	Ownership	100.0	Corporation	l N	0
01200	ourtone corporation	00000	01 1110100				Health Net Health Plan of		1	Thourst Hot, ELo	0 11101 0111 p		Centene		
01295	Centene Corporation	95800	93 - 1004034				Oregon, Inc	OR		QualMed, Inc	Ownership	100.0	Corporation	.	0
04005	0	00000	00 0007000				QualMed Plans for Health of	D.	NII A	Haraldh Nad III O	0	400.0	Centene	1 ,	0
01295	Centene Corporation	00000	23-2867300				Western Pennsylvania, Inc Pennsylvania Health Care Plan,	PA	NIA	Health Net, LLC	Ownership	100.0	Corporation Centene	.	0
01295	Centene Corporation	00000	25-1516632				Inc.	PA	NIA	Health Net. LLC	Ownership	100.0	Corporation	l N	0
01200	00170110 001701 011	00000							1	Thourst Hot, ELo	0 11101 0111 p		Centene		
01295	Centene Corporation	00000	94-3037822				Health Net Services Inc	DE	NIA	Health Net, LLC	Ownership	100.0	Corporat ion	. N .	0
04005	Contana Consenstina	00000	54-2174068				Health Net Community Solutions,	CA	NII A	Haalah Nat II C	O	100 0	Centene	I ,	0
01295	Centene Corporation	00000	54-2174008				Inc		NIA	Health Net, LLC	Ownership	100.0	Corporation Centene	.	
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona. Inc.	AZ	LA	Health Net. LLC	Ownership	100.0	Corporation	l N	0
	'										,		Centene		
01295	Centene Corporation	00000					Health Net of Pennsylvania, LLC.	PA	NIA	Health Net, LLC	Ownership	100.0	Corporation	.	0
01205	Contone Corneration	00000	23-2456130				QualMed Plans for Health of	PA	NIA	Health Net. LLC	Ownership	100.0	Centene Corporation	I	0
01295	Centene Corporation	00000	23-2430130				Pennsylvania, Inc	PA	NTA	nearth net, LLC	Ownership	100.0	Centene	.	
01295	Centene Corporation	00000	98-0150604				FH Assurance Company	CYM	NIA	Health Net. LLC	Ownership.	100.0	Corporation	l N	0
	'						Health Net Pharmaceutical			,	· '		Centene	1 1	
01295	Centene Corporation	00000	68-0295375				Services	CA	NIA	Health Net, LLC	Ownership	100.0	Corporation		0
01295	Centene Corporation	00000	86-0660443				Health Net of Arizona Administrative Services. Inc	AZ	NIA	Health Net. LLC	Ownership	100.0	Centene Corporation	, ,	
01290	ociticile corporation	UUUUU	00-0000443				Health Net Community Solutions	AL	IN I A	III TO THE CONTROL OF THE CONTROL	ownersinp	100.0	Centene	.	
01295	Centene Corporation	15895	81-1348826				of Arizona, Inc.	AZ	I A	Health Net, LLC	Ownership	100.0	Corporat ion		0
	·						ĺ				İ '		Centene		
01295	Centene Corporation	00000	84-1301249				National Pharmacy Services Inc.	DE	NIA	Health Net, LLC	Ownership	100.0	Corporat ion	. N .	0
01295	Centene Corporation	00000	23-2789453				Integrated Pharmacy Systems,	PA	N I A	National Pharmacy Services	Ownership	00.0	Centene Corporation	NI NI	
U 1290	Contone Corporation	00000	ZJ-Z1054JJ				- III U	Г M	N I M	1116	Owner 2111b	J	Logi hoi at ioii	. [U

								,	,						
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group	<u> </u>	Company	ID.	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage		(Y/N)	*
01295	Centene Corporation	00000	46-2616037				Health Net Access. Inc.	AZ	NIA	Health Net. LLC	Ownership	100.0	Centene Corporation	l M	٥
01233	Centene corporation	00000	40-2010037				MHS Consulting, International,	∧∠		liearth Net, LLo	O#11613111P	100.0	Centene	1	
01295	Centene Corporation	00000	20-8630006				Inc	DE	NIA	Centene Corporation.	Ownership	100.0	Corporation	l N	0
	,									MHS Consulting,			Centene		
01295	Centene Corporation	00000					PRIMEROSALUD, S.L.	ESP	NIA	International, Inc	Ownership	100.0	Corporation	N .	0
04005		00000					MH Services International	ADD.		MHS Consulting,		400.0	Centene	l ,]	
01295	Centene Corporation	00000					Holdings (UK) Limited MH Services International (UK)	GBR	NIA	International, Inc MH Services International	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000					Limited	GBR	NIA	Holdings (UK) Limited	Ownership	100.0		l N	٥
01200	contone corporation	00000					L Tilli (COL			MH Services International	0 #1101 0111 p	1	Centene	1'\	
01295	Centene Corporation	00000					Centene UK Ltd	GBR	NIA	(UK) Limited	Ownership	100.0	Corporat ion	l	0
	•									MH Services International	'		Centene	1 1	
01295	Centene Corporation	00000					The Practice (Group) Limited	GBR	NIA	(UK) Limited	Ownership	100.0		N .	0
04005	Contana Connection	00000					Villa Maria del Triuinfo Salud IS.A. C.	PER	NII A	MHS Consulting,	O		Centene	I	
01295	Centene Corporation	00000					S.A. C	PEK	NIA	International, Inc	Ownership	J	Corporation Centene	^N -	
01295	Centene Corporation	00000					Callao Salud S.A.C	PER	NIA	International. Inc	Ownership	100.0	Corporation	l N	٥
0 1200	Contone corporation	00000					Centene Europe Finance Company	= 11		MHS Consulting,	0 #1101 0111 p	1	Centene	1	
01295	Centene Corporation	00000					Limited	MLT	N I A	International, Inc	Ownership	100.0		l	0
	·						Centene Health Plan Holdings,				,		Centene		
01295	Centene Corporation	00000	82-1172163				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	16395	82-5032556				Ambetter of North Carolina,	NC	I A	Centene Health Plan Holdings,	Ownership.	100.0	Centene Corporation	l M	0
01295	Cerriene Corporation	10393	02-0032000				Carolina Complete Health	J\U	I A	Centene Health Plan Holdings,	Ownership	100.0	Centene	JN -	
01295	Centene Corporation	00000	82-2699483				Holding Company Partnership	DE	NIA	Inc	Ownership	80.0	Corporation	l N	0
0.200		00000					I ar the ompany			Carolina Complete Health			Centene		
01295	Centene Corporation	16526	82-2699332				Carolina Complete Health, Inc	NC	A	Holding Company Partnership	Ownership	100.0	Corporation	N .	0
0.4005							New York Quality Healthcare						Centene	l	
01295	Centene Corporation	00000	82-3380290				Corporation	NY	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	55-0878053				Salus Administrative Services,	NY	NIA	New York Quality Healthcare Corporation	Ownership	100.0	Centene Corporation	l M	٥
01233	Centene corporation	00000	. 55-0070055				1116	JVI		Salus Administrative	O#IIG13111P	100.0	Centene	¹	
01295	Centene Corporation	00000	82-0802846				Salus IPA, LLC	NY	NIA	Services, Inc.	Ownership	100.0	Corporation	N	0
	•												Centene		
01295	Centene Corporation	00000	82-4670677				Calibrate Acquisition Co	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	[0
04205	Contone Corneration	00000	47 4470202				Community Modical Haldings Com	DE	NII A	Calibrata Assuisition Ca	Ownership	100.0	Centene	,	
01295	Centene Corporation	00000	47 - 4179393				Community Medical Holdings Corp., Access Medical Acquisition,	DE	NIA	Calibrate Acquisition Co	Ownership	100.0	Corporation Centene	^N .	
01295	Centene Corporation	00000	46-3485489				Inc.	DE	NIA	Corp.	Ownership	100.0	Corporation	l N	0
0.200			1				Access Medical Group of North	1	1	Access Medical Acquisition,	1	1	Centene	'	
01295	Centene Corporation	00000	45-3191569	[Miami Beach, Inc	FL	NIA	Inc	Ownership	100.0	Corporation	[0
				[Access Medical Group of Miami,			Access Medical Acquisition,	l		Centene		
01295	Centene Corporation	00000	45-3191719				Inc	FL	NIA	Inc	Ownership	100.0	Corporation	[N	0
01295	Centene Corporation.	00000	45-3192283				Access Medical Group of Hialeah. Inc.	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	l MI	0
01290	Contone Corporation	00000	40-0192200				Access Medical Group of		N I A	IncAccess Medical Acquisition,	Ownership	100.0	Centene	[
01295	Centene Corporation	00000	45-3199819				Westchester, Inc	FL	NIA	Inc.	Ownership	100 0	Corporat ion	l N	0

1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location		Directly Controlled by (Name of Entity/Person)	(Ownership, Board, Management, Attorney-in-Fact,	If Control is Ownership Provide	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
				ROOD	Oiix	international	Access Medical Group of Opa-			Access Medical Acquisition,	, , , , , , , , , , , , , , , , , , ,	Ĭ	Centene	(1/14)	
01295	Centene Corporation	00000	45-3505196				Locka, Inc.	FL	NIA	Inc.	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	45-3192955				Access Medical Group of Perrine. Inc.	FI	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	l N	0
01233	ourtone corporation	00000	40-0102000				Access Medical Group of Florida			Access Medical Acquisition,	. o #1101 3111 p	100.0	Centene		
01295	Centene Corporation	00000	45-3192366				City, Inc.	FL	NIA	Inc.	Ownership	100.0	Corporat ion	N .	0
							Access Medical Group of Tampa,			Access Medical Acquisition,	l		Centene	l .l	
01295	Centene Corporation	00000	82-1737078				Access Medical Group of Tampa	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Corporation Centene	N -	0
01295	Centene Corporation	00000	82-1750978				Access Medical Group of Tampa	FL	NIA	Inc.	Ownership.	100 0	Corporation	l N	0
01200	ourrend corporation	00000	02 11 0001 0				Access Medical Group of Tampa			Access Medical Acquisition,	. o iii lo i o i i i p		Centene	1	
01295	Centene Corporation	00000	82-1773315					FL	NIA	Inc	Ownership	100.0	Corporation	N .	0
04005		00000	00 4000004				l	D.E.				00.4	Centene	l ,]	
01295	Centene Corporation	00000	82-4883921				Interpreta Holdings, Inc	DE	NIA	Centene Corporation	Ownership	80.1	Corporation Centene	^N -	
01295	Centene Corporation	00000	46-5517858				Interpreta, Inc	DE	NIA	Interpreta Holdings, Inc	Ownership	100 0	Corporation	l N	0
										g.,			Centene		
01295	Centene Corporation	00000	82-4581788				Patriots Holding Co	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
04005	Contana Consenstina	00000					DuAduana Cananatian	DE	NII A	Dataiata Haldina Ca	O	27.0	Centene	I ,	0
01295	Centene Corporation	00000					RxAdvance Corporation	DE	NIA	Patriots Holding Co	Ownership	ZI .8	Corporation Centene	^N -	
01295	Centene Corporation	00000	32-2434596				Next Door Neighbors, LLC	DE	NIA	Centene Corporation	Ownership.	100.0	Corporation	l N	0
	' '									'	İ '		Centene		
01295	Centene Corporation	00000	83-2381790				Next Door Neighbors, Inc	DE	NIA	Next Door Neighbors, LLC	Ownership	100.0	Corporation	N .	0
04005	Contana Consenstina	00000	00 0440007				Centene Venture Company	MI	NII A	Novt Door Noighborn Las	O	100 0	Centene	I ,	0
01295	Centene Corporation	00000	83-2446307				Michigan Centene Venture Company		NIA	Next Door Neighbors, Inc	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	16505	83-2425735				Illinois	IL	IA	Next Door Neighbors, Inc	Ownership	100.0	Corporation	l N	0
	' '												Centene		
01295	Centene Corporation	16528	83-2409040				Centene Venture Company Kansas	KS		Next Door Neighbors, Inc	Ownership	100.0	Corporat ion	N .	0
01295	Centene Corporation	16499	83-2434596				Centene Venture Company Florida	FL	IA	Next Door Neighbors, Inc	Ownership	100.0	Centene Corporation	N	0
01295	Centene Corporation	10499	03-2434390				Centene venture company Frorita.		I A	Thext boot Netgribors, The	Ownership	100.0	Centene	JV -	
01295	Centene Corporation	00000					HealthEC, LLC.		NIA	Centene Corporation	Ownership	12.8	Corporation	N	0
	·						Arch Personalized Medicine						Centene		
01295	Centene Corporation	00000	83-4144116				Initiative, LLC	MO	NIA	Centene Corporation	Ownership	50.0	Corporat ion	[0
01295	Centene Corporation	00000	83-4205348				Social Health Bridge, LLC	DE	NIA	Centene Corporation	Ownership.	100 0	Centene Corporation	l N	
01233	centene corporation	00000	00-4200040				1000 at the attill birtuge, LLC			Toentene corporation	. Omiigi Siiip	100.0	Centene	[]] \	
01295	Centene Corporation	00000					Social Health Bridge Trust	DE	NIA	Centene Corporation.	Ownership	100.0	Corporation	N	0
	·									<u>'</u>			,		

Asterisk	Explanation

STATEMENT AS OF MARCH 31, 2019 OF THE Michigan Complete Health, Inc.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

		RESPONSE
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	SEE EXPLANATION
Expla	nation:	
1. Bus	siness not written.	
Bar C	ode:	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A - VERIFICATION

Real Estate 2 Prior Year Ended Year To Date December 31 Book/adjusted carrying value, December 31 of prior year 2. Cost of acquired: 0 0 2.1 Actual cost at time of acquisition.....

2.2 Additional investment made after acquisition ... 0 ..0 Current year change in encumbrances.
Total gain (loss) on disposals..... 0 Deduct amounts received on disposals

Total foreign exchange change in book/adjusted carrying value. 5. 0 ..0 Deduct current year's other-than-temporary impairment recognized 0. 8. 0 ..0 0 .0 0 10. Deduct total nonadmitted amounts. Statement value at end of current period (Line 9 minus Line 10) 0

SCHEDULE B - VERIFICATION

	Mortgage Loans		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	0	0
İ	2.2 Additional investment made after acquisition	()	0
3.	Capitalized deferred interest and other.	0	0
4.	Accrual of discount.	0	0
5.	Capitalized deferred interest and other. Accrual of discount. Unrealized valuation increase (decrease). Total gain (loss) on disposals. Deduct amounts received on disposals.	0	0
6.	Total gain (loss) on disposals	0	0
7.	Deduct amounts received on disposals.	0	0
8.	Deduct amortization of premium and mortgage interest points and commitment fees Total foreign exchange change in book value/recorded investment excluding accrued interest Deduct current year's other-than-temporary impairment recognized.	0	0
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest	0	0
10.	Deduct current year's other-than-temporary impairment recognized	0	0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-		
	8+9-10)	0	L0
12.	Total valuation allowance	0	L0
13.	Subtotal (Line 11 plus Line 12)	0	0
14.	Deduct total nonadmitted amounts	0	<u> </u>
15.	Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA – VERIFICATION

	Other Long-Term Invested Assets		
	-	1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	0	L0
	2.2 Additional investment made after acquisition	L0	L0
3.	Capitalized deferred interest and other	L0	L0
4.	2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition Capitalized deferred interest and other Accrual of discount Lippedized valuation increase (decrease)	L0	L0
5.	Unrealized valuation increase (decrease)	0	0
6.	Total gain (loss) on disposals.	0	0
7.	Deduct amounts received on disposals.	0	0
8.	Deduct amortization of premium and depreciation	0	0
9.	Total foreign exchange change in book/adjusted carrying value	0	0
10.	Total foreign exchange change in book/adjusted carrying value	0	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	L0	L0
12.	Deduct total nonadmitted amounts	0	L0
13.	Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks		
	1 Year To Date	2 Prior Year Ended December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,099,449	1,099,593
Cost of bonds and stocks acquired	0	1,099,270
3. Accrual of discount	/2	586
Unrealized valuation increase (decrease)	0	L0
Total gain (loss) on disposals. Deduct consideration for bonds and stocks disposed of	<u>0</u>	L0
Deduct consideration for bonds and stocks disposed of	<u>0</u>	1 , 100 , 000
Deduct amortization of premium Total foreign exchange change in book/adjusted carrying value	0	0
Total foreign exchange change in book/adjusted carrying value	0	0
Deduct current year's other-than-temporary impairment recognized.	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		1,099,449
12. Deduct total nonadmitted amounts	ļ0	0
13. Statement value at end of current period (Line 11 minus Line 12)	1,099,521	1,099,449

STATEMENT AS OF MARCH 31, 2019 OF THE Michigan Complete Health, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	1,099,449	0	0	72	1,099,521	0	0	1,099,449
2. NAIC 2 (a)	0	0	0	0	0	0	0	0
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	1,099,449	0	0	72	1,099,521	0	0	1,099,449
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	1,099,449	0	0	72	1,099,521	0	0	1,099,449

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1\$	
NAIC 3 \$	

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Part 2 - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF MARCH 31, 2019 OF THE Michigan Complete Health, Inc.

SCHEDULE E - PART 1 - CASH Month End Depository Balances

Month End Depository Balances								
1	2	3	4	5	Book Balance at End of Each			9
Depository	Code	Rate of	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6 First Month	During Current Q	8	
Open Depositories	Code	Interest	Quarter	Date	FIIST MOUTH	Second Month	THIIG MOHUI	
P.O. Box 1800, St. Paul, US Bank		0.000			0			
Square One Bank		0.150			120,733	120,733	125,081	 XXX
0199998 Deposits in	XXX	XXX	0	0	0	0	0	XXX
0199999 Total Open Depositories	XXX	XXX	0	0	120,733	345,604	2,334,418	+XXX
	<u> </u>	<u> </u>						1
0399999 Total Cash on Deposit 0499999 Cash in Company's Office	XXX	XXX	0	0	120,733	345,604	2,334,418	XXX
	XXX	XXX	XXX	XXX	0	0	0	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments	Owned End of Current	t Ouartor

1	2	3	4	5	6	7	8	9
			Date	Rate of	Maturity	Book/Adjusted Carrying Value	Amount of Interest	Amount Received During Year
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year
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			ļ					
0000000 Tatal Car	sh Farrivalenta	ļ	ļ	<u> </u>	ļ			^
8899999 Total Cas	en Equivalents					U	U	U